

College Student For A Day Program



African American

February 26, 2014
University of Wisconsin – Superior
High School Student Application

Personal Information

<input type="text"/>	<input type="text"/>	<input type="text"/>	Male <input type="checkbox"/>	Female <input type="checkbox"/>
Name (First)	Name (MI)	Name (Last)		
<input type="text"/>	<input type="text"/>	<input type="text"/>		
Home Phone	Cell Phone	Parent/Guardian Name (Optional)		
<input type="text"/>				
Address				Apt. # If Applicable
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
City	State	Zip	E-Mail Address	
<input type="text"/>				
Name of High School			What year are you in school?	

- Freshman
- Sophomore
- Junior
- Senior

Questionnaire

What career would you like to have?

What is your favorite subject in school?

What extracurricular activities are you involved in? (Ex. Sports, Youth Groups, ...etc)

What are your hobbies?

Have you applied & been accepted to a college? ___Yes___ No If YES, where? _____

Are you interested in participating? ___Yes___ No

Would you like to be paired with a ___Female or ___Male Mentor or ___Either for this program?

For Questions regarding this application or about the CSFAD Program in general, please contact:
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