College Student For A Day Program

High School Student Application

November 20, 2013
University of Wisconsin – Superior

Personal Information

Name (First) _______ Name (MI) _______ Name (Last) _______

Home Phone _______ Cell Phone _______ Parent/Guardian Name (Optional) _______

Address _______ Apt. # If Applicable _______

City _______ State _______ Zip _______ E-Mail Address _______

Name of High School _______

Male ☐ Female ☐

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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