College Student
For A Day Program

American Indian
April 11, 2012
University of Wisconsin – Superior
High School Student Application

Personal Information

Name (First) Name (MI) Name (Last) Male □ Female □

Home Phone Cell Phone Parent/Guardian Name (Optional)

Address Apt. # If Applicable

City State Zip E-Mail Address

Name of High School What year are you in school?

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 for this program?

For Questions regarding this application or about the CSFAD Program in general, please contact:
Ivy Vainio | 715.394.8415 | yvainio@uwsuper.edu