

PLEASE COMPLETE FULLY:

**PERSONAL AND CONFIDENTIAL INFORMATION**  
(PLEASE PRINT)

Date \_\_\_\_\_  
EMAIL \_\_\_\_\_  
ADDRESS \_\_\_\_\_

To be completed by the student:

CELL PH# \_\_\_\_\_

NAME \_\_\_\_\_  
(Last) (First) (Middle Initial)

STUDENT ID NUM. (SS#) \_\_\_\_\_

LOCAL ADDRESS:

PERMANENT ADDRESS:

STREET  
(inc. Apt. No.) \_\_\_\_\_

STREET  
(inc. Apt. No.) \_\_\_\_\_

CITY \_\_\_\_\_

CITY \_\_\_\_\_

STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

TELEPHONE NO. \_\_\_\_\_  
(area code)

TELEPHONE NO. \_\_\_\_\_  
(area code)

Birth Date \_\_\_\_\_

Social Security Number \_\_\_\_\_

Driver's License Number (List state abbreviation first) \_\_\_\_\_

Your Part-time job (Company Name) \_\_\_\_\_

Company Address \_\_\_\_\_

CLASS: Fresh. \_\_\_\_\_ Soph. \_\_\_\_\_ Jr. \_\_\_\_\_ Sr. \_\_\_\_\_ Grad. \_\_\_\_\_ Exp. Graduation Date \_\_\_\_\_

Spouse's Name \_\_\_\_\_ Spouse's Employment \_\_\_\_\_

PARENT OR GUARDIAN:

Name \_\_\_\_\_  
(First) (Initial) (Last)

Street (inc. Apt. No.) \_\_\_\_\_ Telephone \_\_\_\_\_  
(area code)

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Parent's Employer's Name \_\_\_\_\_

Employers Business Address \_\_\_\_\_  
(City) (State)

Brothers and Sisters over 18 not living at home, (List married name of sisters, for example: Mrs. Robert R. Anderson.)

Name \_\_\_\_\_ Address \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_

PERSONAL REFERENCES:

Name \_\_\_\_\_ Relation \_\_\_\_\_ Address \_\_\_\_\_ Ph# \_\_\_\_\_

Name \_\_\_\_\_ Relation \_\_\_\_\_ Address \_\_\_\_\_ Ph# \_\_\_\_\_