



STUDENT APPLICATION

I hereby certify that, to the best of my knowledge, the information provided in the application is true and complete. I understand that if it is found to be otherwise, it is sufficient cause for dismissal.

Mother/Guardian Signature Date Father/Guardian Signature Date

Student Signature Date

Section 1 – Student Information

Student Name: Last First Middle Today's Date: Month Day Year

Social Security Number: Date of Birth: Month Day Year Gender: M F

Home Address:

Street Address Apartment / Unit No. City State Zip

Telephone: Home Phone Cell Phone

E-mail Address: T-shirt Size:

Do you have a part-time job? No Yes If yes, what is it?

DHS Student Number: Current Grade Level: 8 9 10 11 12

School Counselor:

Two Teacher Names/Email:

Do you have an Individualized Education Program (IEP) or a Section 504 Plan? No Yes If yes, please attach a complete copy including the most recent review.



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**This information is requested to comply with federal and state laws. Your response will not affect consideration of your application.**

*Ethnic Background:*

Are you Hispanic or Latino?  Yes  No

*Check one or more of the following race/ethnicity groups with which you identify:*

American Indian  Black/African American  Alaska Native  Asian  
 Native Hawaiian  White  Pacific Islander  Other not listed: \_\_\_\_\_

*Is English your native language?*  Yes  No

If no, please list your native language: \_\_\_\_\_

*Are you a U.S. citizen?*  Yes  No

If not, are you a Permanent Resident of the U.S., or have you applied for Permanent Residency?  Yes  No

***If yes, please attach a copy of form(s).***

Are you interested in participating in the six-week academic summer academy program on the Kishwaukee College campus?  Yes  No  Not Sure