

UW (UW-Fox Valley) M/D Targeted Pre-College Program Common Registration

Program Code for office use

Campus Identification Number _____
(Assigned by University)

Student Name: last first middle Social Security Number: _____

Date of Birth: MM/DD/YYYY Gender: Male Female Current School Grade Level: _____

School Attending: _____ School ID Code: for office use DPI Student ID: if assigned

Cumulative Grade Point Average: _____ (copy of transcript required)

Race/Ethnicity – Please answer both a and b. Check **ALL** that apply.

- a. Is the student Spanish/Hispanic/Latino/a?
 No, not Spanish/Hispanic/Latino/a Yes, Puerto Rican Yes, Mexican American, Chicano
 Yes, Cuban Yes, other Spanish/Hispanic/Latino/a – print group _____
- b. What is the student's race? Please check **ALL** that apply.
 American Indian/Alaska Native – please specify principal WI or Other tribe & reservation _____
 Asian Indian Guamanian or Chamorro Native Hawaiian White
 Black or African American Hmong Samoan
 Cambodian Japanese Vietnamese
 Chinese Korean Other Asian – please specify _____
 Filipino Laotian Other race – please specify _____

Student Primary Contact Information (primary phone number and address)

Name: _____ Relationship to Student: _____
 Street Address: _____ City/State/Zip: _____
 Home Phone Number: _____ Cell Phone: _____
 Work Phone Number: _____ Student/Contact e-mail: _____

HEAD OF HOUSEHOLD: Female	HEAD OF HOUSEHOLD: Male
Have you earned a bachelors degree from a four-year college or university? <input type="checkbox"/> No <input type="checkbox"/> Yes	Have you earned a bachelors degree from a four-year college or university? <input type="checkbox"/> No <input type="checkbox"/> Yes

Does your family qualify for or receive Free or Reduced lunches? Yes No

Does your family qualify for or receive any other forms of state or federal support (TANF, food stamps, etc.)? Yes No

Would you like a scholarship application package? Yes No

Scholarships you are applying for: Please check all that apply.

- DPI Precollege Minority Scholarship
 Other scholarship – print name of scholarship _____
 None, not applying for scholarships. (Online program scholarship information at http://apps9.uwex.edu:80/pls/uwhelp/precollege_programs)

Have you been a DPI Precollege Scholarship Recipient? Yes No

Are you a GEAR UP student? Yes No

Areas of Interest – Please check the most interesting (up to three).

- | | | | | | |
|---|--------------------------------------|---|------------------------------------|--|---|
| <input type="checkbox"/> Agriculture | <input type="checkbox"/> Business | <input type="checkbox"/> English/Literature | <input type="checkbox"/> Languages | <input type="checkbox"/> Music | <input type="checkbox"/> Study Skills |
| <input type="checkbox"/> Architecture | <input type="checkbox"/> Computer | <input type="checkbox"/> Environment | <input type="checkbox"/> Law | <input type="checkbox"/> Natural Science | <input type="checkbox"/> Social Science/
Culture |
| <input type="checkbox"/> Arts/Humanities | <input type="checkbox"/> Education | <input type="checkbox"/> Health Care | <input type="checkbox"/> Math | <input type="checkbox"/> Nursing | |
| <input type="checkbox"/> Athletics | <input type="checkbox"/> Engineering | <input type="checkbox"/> History | <input type="checkbox"/> Medicine | <input type="checkbox"/> Politics | |
| <input type="checkbox"/> Other – print area _____ | | | | | |

I certify that the above information is true and correct to the best of my knowledge. I agree to the release of my school transcript(s) to the UW-Fox Valley Campus Office of Precollege Programs and to the Wisconsin Department of Public Instruction.

Student Signature

Date

_____ has my permission to participate in the Precollege Programs sponsored by the University of Wisconsin-Fox Valley and the Wisconsin Department of Public Instruction. I understand that the information provided will be used solely for program evaluation and program eligibility purposes and will be kept confidential.

Parent Signature

Date