



**PUENTE PROJECT
STUDENT INFORMATION FORM**

Name _____ Social Security # (attach temporary post-it with the #)

Address _____ Phone (____) _____

City _____ Zip Code _____

E-mail address _____

Permanent Address (Address of parent or someone who will always know where you are.)

Name _____ Relationship _____

Street _____

City & State _____ Zip Code _____

High School Graduate? Yes___ No___

Name of High School _____ Year Graduated _____

Other Colleges Attended _____

College Units Completed _____

Please describe your career goal: _____

_____ Major _____

Assessment Scores: Reading_____ Math_____ English_____

Do you plan to transfer to a four-year college? Yes___ No___ Don't Know___

Are you eligible for financial aid? Yes___ No___ Don't Know___

Are you working while attending school? Yes___ No___

Please describe why you want to be in the Puente program: _____

Answering these questions is voluntary. The information will remain confidential and will be used to assist you in developing an educational plan to meet your academic goals.

Important: See next side

INTENT TO REGISTER

I agree to make a full commitment to the Puente program. This commitment includes the following:

- Enroll in the two-course English writing class sequence (one year)
- Enroll in the paired counselor guidance class
- Attend all class sessions regularly
- Participate in mentoring activities
- Participate in occasional evening and Saturday program activities

Signature

Date

IMPORTANT: THIS FORM MUST BE RETURNED BY:

PLEASE RETURN TO:

FOR OFFICE USE ONLY

Attended Orientation Date: _____

Counselor Interview Date: _____

Form Received Date: _____

By: _____