



ACADEMIA LATINA 2009

APPLICATION FORM

(PLEASE FILL OUT OR CHECK ALL APPROPRIATE INFORMATION)

____ NEW STUDENT
 ____ RETURNING STUDENT (DATE OF LAST YEAR ATTENDED) _____

Student Name (First, Middle, Last):		
Mailing Address:		
City:	State:	Zip:
Phone (Home):	Phone (Parent/Guardian work number):	
Cell Phone:	Email:	
Age at Start of ACADEMIA LATINA:	Birth date:	<input type="checkbox"/> Male <input type="checkbox"/> Female
Parent/Guardian Name:	Relationship to student:	
Parent/Guardian Occupation:	Employer/Company:	
School:	Grade Completed in 6/09:	
School District:	County:	

Person Nominating Student:	
Relationship to student:	How long?
Home Phone:	Work Phone:

Emergency Contact Person:	Relationship to student:	
Address:		
City:	State:	Zip:
Home Phone:	Work Phone:	Cell Phone:

Roommate Request: We do not recommend requesting roommates. Part of the ACADEMIA LATINA experience is meeting new people and making new friends. However, we will try to accommodate roommate requests if absolutely necessary. SIGNATURES FROM BOTH ROOMMATES ARE REQUIRED.

Roommate Request:
Signatures from both roommates: /

BE SURE TO TURN OVER APPLICATION AND COMPLETE PAGE 2

If a scholarship application is needed check here

RETURN **COMPLETE** APPLICATION PACKET TO:
 ACADEMIA LATINA 2009 – PRE-COLLEGE YOUTH PROGRAMS, SOUTHERN OREGON UNIVERSITY DCE
 1250 SISKIYOU BLVD. - ASHLAND, OREGON 97520 PHONE: (541) 552-6452

