



2011-2012 Application Form

Date: _____ KU ID# _____

Name _____

Permanent Information:

Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

Email Address (please write legibly): _____

Personal Information:

Ethnicity _____

Do you identify as a first-generation student? Yes No

Anticipated Major(s)/Minor _____

Application Questions:

1. Please tell us about yourself (hometown, major, academic goals, involvement, etc.) _____

2. Why are you interested in the Hawk Link Program? _____

(OVER)

3. What do you hope to gain from being in the Hawk Link Program? _____

4. Additional information: _____

Signature

Date

Please return completed application to:
The University of Kansas-Hawk Link Program
Office of Multicultural Affairs
Sabatini Multicultural Resource Center
1299 Oread Ave., Lawrence, KS 66045
OR
Fax to: (785) 864-1675

<p>For Office Use Only: Date Received _____ Orientation Date _____ HLG _____</p>
