PUENTE PROJECT





Please complete this form if you are interested in Foothill College's Puente Project. The information provided on this sheet will remain confidential and will be used to assist you in developing your academic goals and success as a Foothill College student. The Puente Project is open to all students and does not discriminate based on age, gender, race, or ethnic background.

Please return to Maritza Jackson Sandoval at email puente@foothill.edu.

Counseling Division Rom 8316, Footniii College,	12345 EI WO	nie Road, Los	S AILOS HIIIS, CA	94022.		
STUDENT INFORMATION						
Last Name	First			M.I.	Student ID #	
Street Address				Apartment/Unit #		
City	State	State			ZIP	
Home Phone () -	Cell P	Cell Phone () -				
E-mail Address	<u>'</u>					
Permanent Address (address of parent or someone who will always know where your are)						
Name	Relat	Relationship				
Street Address Apartment/Unit #						
City		State			ZIP	
EDUCATION						
High School		Did You Graduate? YES ☐ NO ☐ If yes, What Year?				
Other College		College Units Completed				
Other College		College Units Completed				
College Major or Other Academic Interests						
Do You Plan To Transfer To A Four-Year University? YES \(\square \) NO \(\square \) DON'T KNOW \(\square \)						
ADDITIONAL INFORMATION						
Are You Working While Attending School?	YES	NO \square	DON'T KNO	W If	Yes, How Many Hours A Week?	
Are You Eligible For Financial Aid?	YES	NO				