



INSTRUCTIONS: Fill out Section I completely, and parent or guardian needs to sign it. Then, give the form to your teacher, counselor, or principal for completion of Section II. Students who are disruptive or sent home from precollege programs may forfeit the opportunity for participation in future programs.

College Access Program
 University of Wisconsin-Madison
 1025 W. Johnson Ave., Suite 265
 MADISON, WI 53706

I. STUDENT INFORMATION

Name Last	First	Middle Initial	Grade Level at Time of Program <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12
Street Address City, State, Zip			Telephone Area/No.

Race/Ethnicity <i>Check all that apply</i> (For Statistical Purposes) <input type="checkbox"/> American Indian/Alaska Native <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Black/African American <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> White	Date of Birth <i>mm/dd/yy</i> Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	School Presently Attending School District Name
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I HEREBY AUTHORIZE release of my child's current report card and verification of free and reduced price school meals eligibility to the Precollege Program and DPI.

Signature of Parent/Guardian 	Date Signed <i>mm/dd/yy</i>
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II. VERIFICATION AND RECOMMENDATION

Instructions: To the teacher, counselor, principal, or DPI/WEOP staff member. Please verify the following by checking the boxes and forward this application form and current report card to the college or university where the student has applied for admission to a Precollege Program.

Verification of Eligibility *please check all that apply*

- Student is eligible for free and reduced price school meals.
- Student has completed grade 5 but has not graduated from high school.
- Current Report Card is attached.
- I recommend that the applicant receive a precollege scholarship.

I verify that this student is eligible and I recommend them for a scholarship.

Name	Title	Telephone Area/No.
Verification Signature 		Date Signed <i>mm/dd/yy</i>