



Application Deadline: No later than July 3, 2020

Please respond to the following questions. Answer honestly and to the best of your ability, and as neatly as possible. Your personal information will be held confidentially. Program will be on **Tuesdays only, June 14-August, 25**

Name (First and Last):
Birthday (MM/DD/YYYY)
Home or Mailing Address:
City: _____ State: _____ Zip Code _____
Home phone: _____ Cell: _____
Email:
Languages you speak (fluently or not)
Language(s) primarily spoken in your home:
Parents/guardians who will drop you off or pick you up after program & phone number:
Name of school you are attending:
Current grade level in school:
Year you expect to graduate from High School:
Current GPA: _____ (this will not affect your acceptance into the GANAS program)
T-SHIRT SIZE X-large <input type="checkbox"/> large <input type="checkbox"/> medium <input type="checkbox"/> small <input type="checkbox"/>
Returning GANAS student: Yes <input type="checkbox"/> No <input type="checkbox"/>
GANAS EDÚCATE

Why do you want to attend COCC's GANAS PROGRAM?

Please describe what your future goals are in detail?

Please discuss what things you are currently doing at your High school and/or community?

For returning GANAS student. Why do you want to return to GANAS?

Please return to Claudia Bisso-Fetzer, Ph.D. cbissofetzer@cocc.edu