

# STUDENT APPLICATION PACKET

College of Saint Benedict  
Saint John's University

## UPWARD BOUND PROGRAM

### *STUDENT INFORMATION*

Name: \_\_\_\_\_  
                    LAST                                    FIRST                                    MIDDLE

Address: \_\_\_\_\_  
                    STREET / APT.                            CITY                            STATE                    ZIP

Home Phone: \_\_\_\_\_ Sex: Male Female

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

U.S. Citizen: Yes No

Race: African American Asian/Pacific Islander White

Hispanic/Non-Black American Indian

Other: \_\_\_\_\_

High School: \_\_\_\_\_ Present Grade in School: \_\_\_\_\_

Graduation Date: \_\_\_\_\_ T-Shirt Size: \_\_\_\_\_

Please complete reverse side of sheet

