The American Indian Recruitment Program - AIR Fall 2008 / Spring 2009 - "Voices of Tomorrow" - Application

Application for Program: AIR Sr. (US	SD/SDSU) AIR Jr. (USD/SDSU) (Other):	
Student Information (Plea	se Print)	S. N
Name:		an tuk
Address:		me: Ident Information-Application
City:		⊥l at ii
Home Phone Number (Please include Area	Code):	<u> </u>
Email Address:		fo
High School/Middle/Elementry School Atte		Į š∣
Age: Date of Birth:	Male Female	na
Current Year in School (Check One)	Senior Junior Sophomore Freshman	<u> </u>
	Other:	_l ĕ l
What is your current school schedule (Date	e/Semester/Quarter):	.
	2	l 원
3	4	
	6	ca
What are your two most difficult subjects?:		e e
	2	Š
Parer	nt or Legal Guardian Information	
Name of Parents or Legal Guardian:		
Address:		
City:	State: Zip Co	de:
	Secondary Number:	
Email Address:		
In case of emergency we will contact the	Primary contact number and then the secondary number (in that o	order) Are there any

Contact the AIR Program at: Renee White Eyes: (760) 315-3940 or Dwight (619) 920-3152 or Email: info@airprograms.org

The AIR Program does not discriminate based on sex, sexual orientation, color of skin, religious background, nor ethnic background. The AIR Program is a 501(c)(3) non-profit organization that is funded through public and private donations and grants.

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Are you participating in any other programs or after-school activities? If yes, please list:	
Are you participating in any other programs of after-school activities: If yes, please list.	
What are your thoughts on College?	
Do you see yourself attending college? Why or why not?	4
What requirements does it take to get into college (example: good grades~2.0/letters/etc.):	
Has anyone in your immediate family ever gone to college? Yes No Please tell us about yourself. Include what your interests are and why; (ie: what your favorite subjects are and why; where you	ou like
to go on vacation and why, or anything that may say something about yourself). Use additional paper if needed.	
	7
This application is not complete without signature of your Parent or Legal Guardian, giving their permission for you, the application this mentoring/tutoring program. The AIR Program reserves the right to materials developed within the program including research, video and photos for further use. By signing this application, the Applicant and Parent /Legal Guardian of their consent to the AIR Program to use such materials within the scope of the program for present and future use.	itself,
Signature of Applicant: Date:	
Signature of Parent or Legal Guardian: Date:	
(Note: you may choose to bring your application with you to our meeting)	

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Please send application to: **AIR Programs** PO Box 880471 San Diego, CA 92168