SCHOOL ACTIVITIES/AWARDS, COMMUNITY ACTIVITIES, FINANCIAL HARDSHIP, SPECIAL CIRCUMSTANCES

Please use this space to provide any of the above activities or circumstances you wish to submit.

1-SAVE the completed document to your computer. 2-Submit a copy to the "Activity-Circumstance" Drop Box

FIRST NAME:	_ LAST NAME:
Year in which you will be enrolled for Fall 2018 □ Undergraduate □ Graduate Student □ Non-Traditional	
Activity/Special Circumstance:	Date:
Name of Supervisor	Contact #: ()
Activity/Special Circumstance:	Date:
Name of Supervisor	Contact #: ()
Activity/Special Circumstance:	Date:
Name of Supervisor	Contact #: ()

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FIRST NAME:	LAST NAME:
Activity/Special Circumstance:	Date:
	Contact #: ()
Activity/Special Circumstance:	Date:
	Contact #: ()
Activity/Special Circumstance:	Date:
Name of Supervisor	Contact #: ()