

THE CENTER FOR PUBLIC SERVICE AND SCHOLARSHIP
LEADERSHIP BY DESIGN SUMMER PROGRAM
STUDENT PROFILE

Participant's Name: _____

First Name Preference: _____

Male/Female

School: _____

Home Address: _____

E-mail: Parent's/Guardian's: _____

E-mail: Student Participant's: _____

Parent's/Guardian's Names: _____

Home Phone: _____ Parent's/Guardian's Work Phone: _____

Cell Phone: _____ Emergency Phone: _____

School Activities: _____

Community/Volunteer Activities: _____

Talent or hobby that you have that others might not know: _____

Accomplishment of which you are most proud: _____
