**KS-LSAMP SCHOLAR PROGRAM**

**Student Application Form**

PLEASE WRITE CLEARLY

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current/intended major at K-State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Previous College/University: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

U.S. Citizen: \_\_\_\_\_\_\_\_ YES \_\_\_\_\_\_\_ NO Cell phone: (\_\_\_\_\_\_\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current grade point average: \_\_\_\_\_\_\_\_\_\_\_ Expected graduation date (mo/yr): \_\_\_\_\_\_\_\_\_\_\_\_\_

**Why do you want to become a KS-LSAMP scholar? How do you see your involvement contributing to your success at Kansas State University?**

I understand that if accepted into KS-LSAMP scholar program, I will be part of Kansas Louis Stokes Alliance for Minority Participation, which is an academic program that will track and support my academic progress during and after my college career. Yes: \_\_\_\_\_\_\_\_ Not clear: \_\_\_\_\_\_\_

**I HEREBY AFFIRM THAT ALL INFORMATION CONTAINED IN THIS APPLICATION IS TRUE, TO THE BEST OF MY KNOWLEDGE**

APPLICANT SIGNATURE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_