



Valparaiso University

(PLEASE TYPE OR PRINT CLEARLY)

S.M.A.R.T. SCHOLARS PROGRAM

~Student Mentoring And Retention Team~

MENTEE APPLICATION: 2011

LAST NAME FIRST NAME MIDDLE NAME

MAJOR: MINOR:

CAMPUS Unit # Residence Hall Name

Or LOCAL ADDRESS if you are a commuter:

University email address:

Cell phone number:

DATE OF BIRTH (MONTH/DAY/YEAR)

HIGH SCHOOL GRADUATED FROM: GPA:

CITY/ STATE OF HIGH SCHOOL

HAVE EITHER OF YOUR PARENTS EVER ATTENDED COLLEGE? Yes No

WILL YOU BE THE FIRST IN YOUR FAMILY TO ATTEND COLLEGE? Yes No

WILL YOU BE PARTICIPATING IN VARSITY ATHLETICS AT VU? Yes No

IF SO, PLEASE INDICATE: Football Basketball Soccer Track & Field Other:

WILL YOU BE: LIVING ON CAMPUS COMMUTING TO AND FROM CAMPUS

ARE YOU: INCOMING FRESHMAN TRANSFER STUDENT

DEMOGRAPHICS: (Check all that apply) FEMALE MALE

AFRICAN AMERICAN AMERICAN INDIAN ASIAN/PACIFIC IS.

HISPANIC/LATINO CAUCASIAN/WHITE MULTIRACIAL

OTHER: Please specify:

DESCRIBE QUALITIES OR CHARACTERISTICS YOU ARE LOOKING FOR IN A PEER MENTOR: (Feel free to use other side)

PLEASE COMPLETE AND SEND TO:

Valparaiso University
Office of Multicultural Programs
Harre Union, 1509 Chapel Drive
Valparaiso, IN 46383
FAX: 219-464-6868 (Attn. OMP)

Questions? Contact: Jane.BelloBrunson@valpo.edu or Chiquita.Richardson@valpo.edu