

**VERIZON INNOVATIVE LEARNING FOR MINORITY MALES PROGRAM
@ TEXAS SOUTHERN UNIVERSITY
2017 APPLICATION FORM**

STUDENT INFORMATION

First Name _____	Middle _____	Last Name _____	Date _____
Gender _____	Age _____	Birthdate ____/____/____	Ethnicity (Optional) _____
Home Address _____			
City _____	County _____	State _____	Zip _____

PARENT INFORMATION

Parents/Guardian _____		
Address (if different) _____		
Telephone: Home/Cell (____) _____	Work (____) _____	Email _____

SCHOOL INFORMATION

Current School _____	School District _____		
Current Grade (select one) 6th _____	7th _____	8th _____	
School Address _____			
City _____	County _____	State _____	Zip _____

Sessions - Students can participate in only one session this summer. Attendance at all program activities is mandatory. If a child misses more than two (2) days during the session, he will be excused from the program.

Please choose one session

Session 1 (June 5-16) _____ **Session 2** (June 19-30) _____

Indicate T-Shirt Size (Circle One-adult sizes) S M L XL XXL Other _____

Additional Information: _____

Applications will not be processed with incomplete information. All materials must be provided to the program director no later than Monday, April 17, 2017 at 5:00 p.m.

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