

# CONFIDENTIAL PERSONAL DATA SHEET

⊖ ENTRANCE

⊖ OTHER

⊖ EXIT

**WARNING:** Any person who knowingly makes a false statement or misrepresentation on this form may be subject to penalties that may include fines, imprisonment or both, under the United States Criminal Code and 20 U.S.C. 1097.

*Please Print With Black Ink and Follow Instructions Carefully*

↓ **PERSONAL** - Complete this section with information about yourself and spouse (or other).

1. Name: (Last) 1 (First) 1 (Initial) 1		2. Nickname: 1
3. Social Security Number:	4. Birth Date (MM/DD/CCYY): 1	5. Maiden Name (if Applicable): 1
6. Current Residence Address: 1	8. Permanent or Mailing Address: 1	10. Driver's License (or State ID) #: 1 State: 1
City, State, Zip Code: 1	City, State, Zip Code: 1	11. E-Mail Address: 1
7. (Area Code) Phone: 1	9. (Area Code) Phone: 1	Cell Phone: 1
13. Employer (or expected Employer): 1	14. Spouse/Roommate Name: 1	
Employer's Street Address: 1	15. Street Address (if different): 1	Apt #: 1
City, State, Zip Code: 1	City, State, Zip Code (if different): 1	
(Area Code) Phone: 1	(Area Code) Phone (if different): 1	

↓ **RELATIVES** – Enter **ALL** information requested for **three** adult relatives. *If necessary, provide substitute references.*

— DO NOT LEAVE ANY RELATIVES OR REFERENCES BLANK FOR ANY REASON - SEE INSTRUCTIONS —

16. Parent/Guardian: 1	18. Maternal Grandmother: 1	20. Paternal Grandmother: 1
Street Address: 1 Apt #: 1	Street Address: 1 Apt #: 1	Street Address: 1 Apt #: 1
City, State, Zip Code: 1	City, State, Zip Code: 1	City, State, Zip Code: 1
(Area Code) Phone: 1	(Area Code) Phone: 1	(Area Code) Phone: 1
17. Relationship to Student: 1	19. Relationship to Student: 1	21. Relationship to Student: 1

↓ **REFERENCES** - Enter **ALL** information for **three** additional adult relatives/references *at three different addresses.*

22. Adult Relative/Friend (Do not use classmates): 1	24. Adult Relative/Friend (Do not use classmates): 1	26. Adult Relative/Friend (Do not use classmates): 1
Street Address: 1 Apt #: 1	Street Address: 1 Apt #: 1	Street Address: 1 Apt #: 1
City, State, Zip Code: 1	City, State, Zip Code: 1	City, State, Zip Code: 1
(Area Code) Phone: 1	(Area Code) Phone: 1	(Area Code) Phone: 1
23. Relationship to Student: 1	25. Relationship to Student: 1	27. Relationship to Student: 1

I hereby certify that all information provided on this form is complete and correct to the best of my knowledge:

32. **STUDENT SIGNATURE** \_\_\_\_\_

33. **DATE** \_\_\_\_\_