

Newburgh Free Academy West Street Campus (NFA West)

Student's (Legal) Name _____
Last First (Middle)

Street Address _____

City _____ State _____ Zip _____

Is this your mailing address? Yes No If no, please specify: _____

Home/Cell Phone () _____ Student I.D. Number _____
Area Code

STUDENT BIOGRAPHICAL INFORMATION

Date of Birth _____ Age _____ Gender Female Male

Place of Birth _____
City State Country

Ethnicity
Asian or Pacific Islander American Indian/Alaskan Native Black (non-Hispanic)
Hispanic (including Puerto Rico) White, Anglo, Caucasian Other _____

PARENT/GUARDIAN INFORMATION

Mr. & Mrs. Mr. Ms. Other _____

Parent/Guardian 1: _____

Employer	Work	()
:	Phone:	_____
Employer	Work	()
:	Phone:	_____

Email Address: _____
Area Code

Parent/Guardian 2: _____

Employer	Work	()
:	Phone:	_____

Email Address: _____

Emergency Contact	Relationship to student:	Emergency phone:
_____	_____	() _____

ADDITIONAL BIOGRAPHICAL INFORMATION (PHI)-P 02 02 9 reW*BT/F1 19

Applicant's Curricular and Extracurricular Interests

What subject(s) do you consider your strengths?

In what subject(s) have you had the most difficulty?

What profession(s) or vocation(s) are you considering?

List the organizations and offices in which you have been involved.

Check the activities that you have participated in or are interested in:

Chorus

Student Government

Honor Societies

Band

Newspaper

Creative Arts

Service Organizations

Yearbook

Technology Club

Sports - Specify:

Describe the degree of experience in the above checked items (list musical instruments):
