



Educational Talent Search

AT MINERAL AREA COLLEGE
P.O. Box 1000
Park Hills, MO 63601
573-518-2380



Membership Application

Please print neatly in ink. ALL ITEMS MUST BE ANSWERED COMPLETELY.

1. Name: _____

Last

First

Middle

2. Address: _____

Mailing Address

City

State

Zip

3. Home Phone: - Other Ph. #: -

4. Social Security Number: --

5. ___ Male ___ Female

6. Birth date: _____ Age _____

7. Race: (please check appropriate blank)

___ American Indian or Alaska Native

___ Asian

___ Black or African American

___ Hispanic or Latino

___ White

___ Native Hawaiian or

___ More than one race reported

Other Pacific Islander

For Office Use

Only

LI/FG _____

GPA _____

NA _____

TOTAL _____

8. School Currently Attending: _____

9. Current Grade: (please circle) 6 7 8 9 10 11 12

10. Are you a United States Citizen? ___ yes ___ no

11. Parent(s) Name: _____

OR Guardian(s) Name: _____

OR Spouse Name: _____

12. How many people live in your home including you? _____

13. Has either of the parents **OR** guardians you live with earned a four-year Bachelor's degree?

Mother: ___ yes ___ no Father: ___ yes ___ no
Guardian: ___ yes ___ no Guardian: ___ yes ___ no

14. Do you have a disability? * ___ yes ___ no (*providing this information is optional)

15. Do you qualify for free or reduced lunches at your school? ___yes ___no

16. What career are you interested in? _____

17. I need help with:

_____ Deciding on a career _____ Finding a college/school
_____ Applying to a college/ school _____ Applying for financial aid
_____ Homework/class work (tutoring)

18. What would you most like to do with your future?

_____ High school & job _____ Vo-tech _____ College _____ Military

19. TOTAL TAXABLE FAMILY INCOME \$ _____

Any information provided is held in the strictest confidence. **To determine family taxable income refer to 1040 line 40, 1040a line 27, or 1040ez line 6 of your most recent tax form (or forms if parents or guardians file separate returns).**

20. Permission to release academic information:

*I authorize the release of test scores, transcripts, and other information that can assist the Educational Talent Search in determining the applicant's needs, academic potential, and interests. **The signatures below certify the above information.***

Student's Signature

Parent/Guardian's Signature

Date