

Application Deadline: No later than June 03, 2022
Please respond to the following questions. Answer honestly and to the best of your ability, and as neatly as possible. Your personal information will be held confidentially. Program starts **Sunday**, **June 26 - Wednesday**, **June 29**

Name (First and Last):			
Birthday (MM/DD/YYYY)			
Home or Mailing Address:			
City:	State:	Zip Code	
Home phone:	Cell:		
Email:			
Languages you speak (fluently or not)			
Language(s) primarily spoken in your home:			
Parents/gua <mark>rdi</mark> ans who will drop you off or pick you up after program & phone number:			
Name of school you are attending:			
Current grade level in school:			
Year you expect to graduate from High School:			
Current GPA:(this will	not affect your acceptance	into the GANAS program)
T-SHIRT SIZE X-large	large	medium	small
Returning GANAS student: Yes	No [
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Why do you want to attend COCC's GANAS PROGRAM?			
Please describe what your future goals are in detail?			
Please discuss what things you are currently doing at your High school and/or			
community?			
For returning GANAS student. Why do you want to return to GANAS?			

Please return to Claudia Bisso-Fetzer, Ph.D. cbissofetzer@cocc.edu