

Ragin' Cajun Bridge Program Application

Type or print plainly the information requested below.

<small> 1. This information is confidential and will be used only for the purpose of the Ragin' Cajun Bridge Program. 2. Please do not include your Social Security Number on this application. 3. Please do not include your current address on this application. 4. Participation is not available for the UL Lafayette Bridge Program. </small>				
Name (Last/Family)		(First)	(Middle)	Social Security Number
Present Mailing Address Street			Apartment Number	
Present Mailing Address City		State	Zip Code	Country
Email Address			Date of Birth (MM-DD-YYYY)	
Telephone Number (Cell)		Telephone Number (Home)		
High School from which you graduated		Location (City, State)		Graduation Date
Application Semester: <input type="checkbox"/> Fall <input type="checkbox"/> Spring <input type="checkbox"/> Summer Application Year:		Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male		Ethnic Origin (Please check one): <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Non-Hispanic/Latino
College currently attending: <input type="checkbox"/> Louisiana State University/Eunice (LSUE) <input type="checkbox"/> South Louisiana Community College (SLCC)			Race (Please check one or more): <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White or Caucasian <input type="checkbox"/> Other	
Citizenship Status: <input type="checkbox"/> U.S. Citizen <input type="checkbox"/> Permanent Resident <input type="checkbox"/> Refugee Status <input type="checkbox"/> Non U.S. Citizen- Visa Type:		Alien Number: _____		

- Meet with the UL Lafayette Transfer Advisor and SLCC/LSUE Advisor at least once during each semester enrollment at SLCC or LSUE.
- Attend the UL Lafayette Orientation for Bridge Program participants
- Complete the Ragin' Cajun Bridge Application annually and complete the Bridge Program Renewal Form as needed to indicate continued enrollment in the program.

I understand and give my permission for a copy of my academic transcript to be sent from each participating institution to monitor my academic progress toward degree/certificate completion. I understand that failure to meet any of the requirements of the Bridge Program may be grounds for dismissal from the program. I hereby assert that all the information furnished on this form is accurate to the best of my knowledge.

Signature	Date
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Parent Signature (if under 18 years of age)	Date
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