TEEN LAW COLLEGE 2010 Application Valparaiso University School of Law



APPLICANT INFORMATION (Please print clearly.)

1. Name:

	First	Middle	Last	
2.	Home address:			
-				
3.	Home phone: ()			
4.	Gender (Please circle one.): Male	Female		
5.	Date of birth:			
5.	Age at time camp begins: (Applic	cant MUST be 15 years old by t	he first day of camp.)	
7.	E-mail Address:			
3.	Current School:			
	School Address			
€.	Grade in fall 2010			
		T be entering grade10, 11, or 1	2.)	
10.	How did you hear about the Valparaiso	O University School of Law TE	EN LAW COLLEGE?	
11.	Describe your ethnic origin. (This question is optional; information provided will not be used in a discriminatory manner.)			
	African American/Black	African		
	Middle Eastern	American Indian/Al		
	Caucasian	Hispanic, Puerto Rio		
	Asian, East Indian subcontinent Asian, Pacific Islander	Hispanic, Mexican o	or other Hispanic	

PARENT/GUARDIAN INFORMATION

2.	Mother's name			
	Mother's occupation			
	Mother's phone: (Hm)	(Wk)	Cell	
	Mother's home address:			
	City, State, ZIP code:			
3.	Father's name			
	Father's occupation			
	Father's phone: (Hm)	(Wk)	Cell	
	Father's home address: _			
	City, State, ZIP code:			
4.	Emergency contact: (A)	n adult over the c	ge of 21 other than parent/gu	ardian)
	Dhone	Ce	ell:	

ACADEMIC INFORMATION

15. **Recommendations:** Students MUST submit a letter from a principal or guidance counselor supporting their application. Please attach the letter to this application and include the recommender's information below.

Full Name	Title	Institution	Work phone
			-
E-mail address			

16. **Statement of purpose:** <u>On separate paper</u>, please write a two-page essay describing your interest in law, experience you have had with the law, or other reason why you believe attending this camp will be helpful to you.

If you are seeking financial aid to attend the camp without cost, please complete the sections of the application below. If not, please skip this section and sign the application at the bottom. Your parents or guardian must also sign the application in the space provided.

FINANCIAL AID INFORMATION

1. Your parents' number of family members in 2009-2010.

Include in your parents' household: (1) your parents and yourself, even if you don't live with your parents, (2) your parents' other children if (a) your parents will provide more than half of their support between July 1, 2009, and June 30, 2010, and (3) other people only if they live with your parents, your parents provide more than half of their support and your parents will continue to provide more than half of their support between July 1, 2009.

(_____)

2. In 2007 or 2008, did you (or your parents) or anyone in your household receive benefits from any of the federal benefits programs listed below. (*Mark all the programs that apply.*) Select benefits received for all of your household members. Answering these questions will not reduce your eligibility for financial aid. TANF may have a different name in your state. Call 1-800-4-FED-AID to find out the name of your state's program.

Supplemental Security Income () Food Stamps () Free or Reduced Price School Lunch () Temporary Assistance for Needy Families (TANF) () Special Supplemental Nutrition Program for Women, Infants and Children (WIC) ()

3.	Highest school your FATHER completed:	 Middle school/Jr. high College or beyond 	☐ High school ☐ Other/unknown
4.	Highest school your MOTHER completed:	☐ Middle school/Jr. high ☐ College or beyond	High school Other/unknown

5. As of today, are you (or one of your parents) a dislocated worker? In general, a person may be considered a dislocated worker if he or she is receiving unemployment benefits due to being laid off or losing a job and is unlikely to return to a previous occupation; has been laid off or received a lay-off notice from a job; was self-employed but is now unemployed due to economic conditions or natural disaster; or is a displaced homemaker. A displaced homemaker is generally a person who previously provided unpaid services to the family (e.g., a stay-at-home mom or dad), is no longer supported by the husband or wife, is unemployed or underemployed, and is having trouble finding or upgrading employment.

() Yes () No () Don't know

6. What income tax return did your parents file or will they file for 2009?

() IRS 1040 () IRS 1040A () 1040EZ

() A tax return with Puerto Rico, another U.S. territory or a Freely Associated State

If you parents have filed or will file a 1040, were they eligible to file a 1040A or 1040EZ? A person is not eligible to file a 1040A or 1040 EZ if he or she makes \$100,000 or more, itemizes deductions, receives income from his/her own business or farm, is self-employed, receives alimony or is required to file Schedule D for capital gains. If your parents were NOT required to file a tax return or they filed a 1040 only to claim Hope or Lifetime Learning tax credits, and would otherwise have been eligible for at 104A or 1040 EZ, answer, yes.

() Yes () No () Don't Know

Certification: (*Applicant must sign below.*)

I certify that the information provided on the application, including the supplementary material, is complete and accurate. I understand that failure to disclose correct information may result in the cancellation of my application or admission.

Applicant Signature

Date

Signature of Parent or Guardian

Date