

# LINK@ASU

## JUNE 14-19, 2009

### Application Form

Directions: Please print legibly. Use black or blue ink to complete the form. If under 18 years of age, parent signature is required.

ASU ID#: \_\_\_\_\_  
(ex. 1001234560)

Your ASU ID is listed on your Admissions letter.

Admitted Campus (Check one.)  
 DPC  Tempe  
 Polytechnic  West

\_\_\_\_\_  
Last Name, First Name, Middle Initial

\_\_\_\_\_  
Gender \_\_\_ Female \_\_\_ Male Birth date \_\_\_\_\_

Email Address (Preferably, one that is frequently checked.) \_\_\_\_\_

I am interested in the LINK@ASU guest housing experience, and understand that there is an additional **\$100** guest housing fee for the LINK@ASU program.  Yes  No

If "Yes," applicant agrees to participate in the residential portion of LINK@ASU and **must submit** (at least) 50% of guest housing fee with completed LINK@ASU application. Remaining balance is due May 1, 2009. More information will be available upon acceptance into the program.

A parking permit is available for **\$40** for the program duration **only**. Will you need a permit?  Yes  No

If you select "Yes," please submit payment in full with application. This fee is non-refundable. If you do not need a vehicle, it is strongly encouraged to utilize other transportations options (carpooling, light rail, public transit, etc...).

Mailing Address

\_\_\_\_\_  
Address Street Apt.#

\_\_\_\_\_  
City State Zip Code

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_  
Phone Other Phone

Major: \_\_\_\_\_ Date you will be attending (or) did attend Orientation? \_\_\_\_\_  
If undecided, please write UNKNOWN.

Ethnicity: (Choose one or all that apply. If other, please explain.)  American Indian  Asian/Pacific Islander  
 Black  Chicano/Hispanic/Latino  White, non Hispanic  Other \_\_\_\_\_

Why would you like to participate in the LINK @ ASU program?

I certify that all the information is factual and correct to the best of my knowledge. All information is confidential and will be solely viewed by the Application Committee. If necessary, I permit the Committee to access all academic, financial or other necessary information needed to determine my selection. If selected as a participant, I give ASU's Multicultural Student Services permission to use my name and likeness in any of its programming and marketing materials.

\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Parent/Guardian if applicant is under 18 years of age Date

#### Application Process

A non-refundable application fee of **\$75\*** must be included.  
Please total **all fees** and submit check or money order payable to:

#### LINK @ ASU

\*A **fee waiver** is available. To be considered, please submit reason in writing along with application.

Fee Waivers are NOT guaranteed and are approved at the discretion of Coordinator.

All fees cover the administrative costs, materials, and a limited value meal card.



Submit completed application and fees to:

**LINK @ ASU**  
**Multicultural Student Services**  
**PO Box 871112**  
**Tempe, AZ**  
**85287-1112**

Priority Deadline:  
**April 17, 2009**

Applications received or post-marked after the deadline will be subjected to a **\$20** late registration fee.

For more information:  
**480.965.6060**

Email inquiries:  
**LINKprgrm@asu.edu**  
<http://students.asu.edu/linkmss>

**Space is limited!**

