



ECA Student Questionnaire- *This form allows us to get to know you as you apply to the Early College Academy. This form should be completed by the student.*

Student Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Primary Parent/Guardian Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Student Education

Middle School: _____ Address: _____

From: _____ To: _____

Middle School: _____ Address: _____

From: _____ To: _____

Favorite Hobbies

Please list a few of your favorite hobbies: (Note: it is okay not to answer this question.):

Hobby 1:

Hobby 2:

Hobby 3:

High School Interests

Please select any of the following high school initiatives that interest you (Note: it is okay not to answer this question.):

Academic Competition Team	YES <input type="checkbox"/>	Marching Band and Color Guard	YES <input type="checkbox"/>
Art Club	YES <input type="checkbox"/>	National English Honor Society	YES <input type="checkbox"/>
Athletics (Sports Teams)	YES <input type="checkbox"/>	National Honor Society	YES <input type="checkbox"/>
Chess Club	YES <input type="checkbox"/>	Newspaper	YES <input type="checkbox"/>
Chorus and Choral Ensemble	YES <input type="checkbox"/>	Photography Club	YES <input type="checkbox"/>
Class Advisors	YES <input type="checkbox"/>	Project Lead the Way	YES <input type="checkbox"/>
Concert Band	YES <input type="checkbox"/>	Renaissance Committee	YES <input type="checkbox"/>
Drama Department	YES <input type="checkbox"/>	Robotics Club	YES <input type="checkbox"/>
Envirothon	YES <input type="checkbox"/>	Ski & Snowboard Club	YES <input type="checkbox"/>
French Honor Society/French Club	YES <input type="checkbox"/>	Spanish Honor Society	YES <input type="checkbox"/>
Future Business Leaders of America	YES <input type="checkbox"/>	Student Athletic Trainer	YES <input type="checkbox"/>
Future Farms of America	YES <input type="checkbox"/>	Student Council	YES <input type="checkbox"/>
Gay/Straight Alliance	YES <input type="checkbox"/>	Student Diversity Club	YES <input type="checkbox"/>
Helping Hands	YES <input type="checkbox"/>	Technical College High School (TCHS)	YES <input type="checkbox"/>
Interact Club	YES <input type="checkbox"/>	Tri-M Music Honor Society	YES <input type="checkbox"/>
LEOs Club	YES <input type="checkbox"/>	WOHS	YES <input type="checkbox"/>
Library Book Club	YES <input type="checkbox"/>	Yearbook	YES <input type="checkbox"/>

Top Three Colleges or Universities of Choice

Please list three college or universities that you feel are a good fit for you and your educational goals (Note: it is okay not to answer this question.):

College/University:

Desired field of study: _____

College/University:

Desired field of study: _____

College/University:

Desired field of study: _____

Signature

Signature: _____ Date: _____