**HIGHLIGHT THE LABEL TO ADD YOUR INFORMATION!**

|  |
| --- |
| First Name Last Name |
| Street Address |
| City, State ZIP |
| Home Phone |
| Cell Phone |
| Email |
|  |
|  |
| Career Goals |
| * Enter text here, press enter for new bullet |
|  |
| High School Education |
| * Name of high school, city, state * Years attended |
|  |
| College Education Plans |
| * Enter text here, press enter for new bullet |
|  |
| Capacity for Intellectual Growth/Curiosity to Learn/Academic Potential |
| * Enter text here, press enter for new bullet |
|  |
| Achievements (honors, awards, contests) |
| * Enter text here, press enter for new bullet |
|  |
| School Organizations |
| * Enter text here, press enter for new bullet |
|  |
| Extracurricular Interests/Activities |
| * Enter text here, press enter for new bullet |
|  |
| Volunteer Experience |
| * Enter text here, press enter for new bullet |
|  |
| Work Experience |
| * Enter text here, press enter for new bullet |
|  |
| Summer Enrichment Experience |
| * Enter text here, press enter for new bullet |
|  |
| Special Skills/Strengths |
| * Enter text here, press enter for new bullet |
|  |
| Four Qualities I Like Best About Myself |
| * Enter text here, press enter for new bullet |
|  |
| Two Shortcomings that You See in Yourself |
| * Enter text here, press enter for new bullet |
|  |
| Three Qualities My Teachers Like Best About Me |
| * Enter text here, press enter for new bullet |
|  |
| Song, Poem or Book that has Influenced Your Perspective on Life and Why It Impacted Your Life |
| * Enter text here, press enter for new bullet |
|  |
| Philosophy on Life |
| * Enter text here, press enter for new bullet |
|  |
| Extenuating Circumstances that Should be Considered |
| * Enter text here, press enter for new bullet |
|  |