

Application



Name

Address

City, State, Zip

Phone

Email

Township in which you reside _____

County in which you reside _____

Gender: Male Female U.S. Citizen? Yes No Illinois Resident? Yes No

High School

City

State

Zip

Expected Graduation Date _____ Class Rank _____ out of _____

Cumulative GPA (on 4.00 scale) _____ ACT Score (composite) _____

College/University attending fall 2015: (must be in Illinois)

City

State

This is a (check one): 2-Year 4-Year Institution

Expected major