

FAIRMONT STATE
Statement of Activities

Social Security Number _____ Date _____

Name _____
(Please print) Last First Middle/Maiden

High School Graduate? Yes _____ year
 No
 GED recipient _____ year

If high school graduate, print name of high school _____

Have you attended any other Higher Educational Institutions? Yes No
(i.e. Vo Tech Centers, business schools, etc.)

If yes, Where? _____

 When? _____

NOTE: We must have official transcripts from high school and all collegiate level institutions.

Have you attended Fairmont State before? Yes No

If yes, When? _____

List in chronological order your activities (employment, post-high school, etc.) since graduation from high school.

Signature _____

Address _____

