**2017/2018 School Year**

***Return to your Guidance Counselor by* February 2, 2018**

*Email any questions to:*

*Khalid Reichard*

*Early College Coordinator*

*kreichard@muncieschools.org*

**Today’s date:**

**Student information:**

Last name: First name:

Date of Birth: Current age:

Gender: Current school:

Email: Cell phone:

**Parent Information:**

Last name: First name:

Email: Phone:

Address:

**Please mark the box that best describes the level of education for each parent.**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | H.S. Diploma/G.E.D | Some College | 1 year degree/cert. | 2 year degree | 4 year degree | Graduate degree | None of these |
| Mother |  |  |  |  |  |  |  |
| Step-mother |  |  |  |  |  |  |  |
| Father |  |  |  |  |  |  |  |
| Step-father |  |  |  |  |  |  |  |

**Why are you interested in Muncie Central Early College?**

**Why should you be selected?**

**What are your goals after high school?**