

LOOK to Ohio – School Interest Form

Application year 20__ - 20__

School Information

School: _____ Current Grade: _____

Address (street): _____

City & State: _____ Zip Code: _____

School Phone: _____ School Fax: _____

School Guidance Counselor: _____

School Principal: _____

Student #1

Name: (first) _____ (middle) _____ (last) _____

Nickname/Name you prefer to be called: _____

Date of Birth: _____ Sex: M F

Home Address: (street) _____

City & State _____ Zip: _____

Best Phone: _____ Email Address: _____

Parent or Guardian Name (s): _____

Parent or Guardian Email Address: _____

Parent or Guardian Phone: _____

Student #2

Name: (first) _____ (middle) _____ (last) _____

Nickname/Name you prefer to be called: _____

Date of Birth: _____ Sex: M F

Home Address: (street) _____

City & State _____ Zip: _____

Best Phone: _____ Email Address: _____

Parent or Guardian Name (s): _____

Parent or Guardian Email Address: _____

Parent or Guardian Phone: _____

**THE OHIO STATE UNIVERSITY**COLLEGE OF FOOD, AGRICULTURAL,
AND ENVIRONMENTAL SCIENCES**greene.osu.edu**CFAES provides research and related educational
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Student #3

Name: (first) _____ (middle) _____ (last) _____

Nickname/Name you prefer to be called: _____

Date of Birth: _____ Sex: M F

Home Address: (street) _____

City & State _____ Zip: _____

Best Phone: _____ Email Address: _____

Parent or Guardian Name (s): _____

Parent or Guardian Email Address: _____

Parent or Guardian Phone: _____

Student #4

Name: (first) _____ (middle) _____ (last) _____

Nickname/Name you prefer to be called: _____

Date of Birth: _____ Sex: M F

Home Address: (street) _____

City & State _____ Zip: _____

Best Phone: _____ Email Address: _____

Parent or Guardian Name (s): _____

Parent or Guardian Email Address: _____

Parent or Guardian Phone: _____

Student #5

Name: (first) _____ (middle) _____ (last) _____

Nickname/Name you prefer to be called: _____

Date of Birth: _____ Sex: M F

Home Address: (street) _____

City & State _____ Zip: _____

Best Phone: _____ Email Address: _____

Parent or Guardian Name (s): _____

Parent or Guardian Email Address: _____

Parent or Guardian Phone: _____