



STUDENT APPLICATION FORM

1. Name: _____ Date: _____

 2. Home Address: _____
Town: _____ State: _____ Zip: _____

 3. Date of Birth: _____ Phone #: _____

 4. Name & Addresses of high schools/college you have attended:
Name: _____ Address: _____
Town: _____ State: _____ Zip: _____

 5. Name of high school principal during senior year or college department head of your major:
Name: _____

 6. Names of two teachers/professors who have known you well in high school/college during your high school senior year/college term _____

 7. Approximate graduation date: _____

 8. (High school seniors only) Have you completed applications for college admission? If yes, to what colleges?
College Name (use other side if necessary)
_____ Accepted? Yes (), No (), Don't know ()
_____ Accepted? Yes (), No (), Don't know ()

 9. List any academic honors you received: _____

 10. To what clubs or organizations do you belong, in and out of school? If you held or now hold any office in one of these groups, please state the title of this office.

 11. List below other information you feel might have bearing on this application. (Please use an extra sheet of paper if necessary.) _____
- Signature of Applicant: _____ Date: _____

Return to Metropolitan New York Paint & Coatings Association

P.O. Box 408, Navesink, NJ 07752