



Youth Options Supplemental Information Form

Please complete the information below and return with your Youth Options Application (PI-8700-A).

Student Information: Last Name First Name Middle Name

Social Security Number: (This information is voluntary and will remain confidential. It is not used as a student identification number.)

U.S. Citizen: Yes No

Legal resident of: City Village Township County of Residence:

Expected graduation date: (MM/YYYY) High School:

Ethnicity: Are you Hispanic or Latino? Yes No

- Select any other group or groups that apply to you: American Indian or Alaska Native Asian Black or African American Native Hawaiian or other Pacific Islander White.

Class Information:

CVTC Campus or location where you will attend classes:

- CVTC - Eau Claire CVTC - Chippewa Falls CVTC - Menomonie CVTC - Neillsville CVTC - River Falls CVTC - Internet Your high school ITV/distance Learning Room Your high school Charter School

Is your intent to (check one): Enroll in course(s) only Enroll full time in a CVTC program this semester (program title: )

Youth Options Class Fees:

Identify the class(es) below for which you (not the high school) will be paying:

Table with 3 columns: Course(s) to be paid by Student, Course No., CVTC No. of Credits

- A complete Youth Options application (PI-8700-A) and Supplemental Information form must be received by CVTC no later than: December 1 for the CVTC semester beginning in January June 1 for the CVTC semester beginning in August

Student Signature

Date

Return to: Youth Options Coordinator, Chippewa Valley Technical College, 620 W. Clairemont Ave., Eau Claire, WI 54701 For additional information go to: