

For office use only:

Advising Worksheet: _____
Math Test: _____
Financial Aid: _____
Interview: _____

Date: _____

Project Leeway Application

Social Security # _____ Email _____

Name _____

Last

First

Middle Initial

Address _____

City

State

Zip

Telephone () _____ Alternate Telephone () _____

Marital Status: *(Please circle one)* Married Single Separated Divorced/Widow

Do you have children? Yes No Ages of children: _____

Do the children live with you? _____

Financial Aid

Have you applied for financial aid? Yes No When? _____

Have you been awarded financial aid for the fall/spring semester? _____

Do you currently receive help through: *(Please circle)*

- AFDC/TANF? Yes No
- Food Stamps? Yes No
- WIC? Yes No
- Medicaid? Yes No
- Free or Reduced School Lunches? Yes No

Do you live in Public or Section 8 housing? Yes No

Will you need child care assistance? Yes No

If so, have you applied to NCI? Yes No

Educational History

High School: Name _____ Year Graduated _____

Location _____ *(please circle one)* Public Private Home School

If GED earned, give date _____ Name of Institution _____

Other Education _____

Have you taken the Lee College Placement tests yet? Yes No

Educational Goals

Why do you want to go to college? _____

What type of training might you be interested in? _____

Do you intend to go to work following training?

Do you have dependable transportation?

Do you have a back-up plan if your transportation falls through?

If eligible you will receive licensed child care assistance. Do you have a back-up plan for child care if your child(ren) has a fever?

Attending class every day and arriving on time are considered extremely important in this program. Will you be able to attend each day?

Will you be able to arrive on time each day?

Why do you believe you should be selected for Project Leeway?

Please submit the application to:

Clare Fleming
Special Populations Director
Lee College
P.O. Box 818
Baytown, Texas 77522-0818