

The American Indian Recruitment Program - Tutorial

Tutorial Project - Application

This application is for the AIR Tutorial Project. In order to provide the best possible service to our student participants we must have complete and accurate information provided on this application. All applications are confidential and kept on file at the AIR Programs Office.

Student Information (Please Print)

Name: _____

Address: _____

City: _____

Home Phone Number (Please include Area Code): _____

Email Address: _____

High School/Middle/Elementary School Attending: _____

Age: _____ Date of Birth: _____ Male Female

Current Year in School (Check One) Senior Junior Sophomore Freshman

Other: _____

What is your current school schedule (Date/Semester/Quarter): _____

1. _____ 2. _____

3. _____ 4. _____

5. _____ 6. _____

What are your two most difficult subjects?:

1. _____ 2. _____

Student Information-Application

Name: _____

Parent or Legal Guardian Information

Name of Parents or Legal Guardian: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Primary Contact Number: _____ Secondary Number: _____

Email Address: _____ In case of emergency, we will contact the Primary contact number

and then the secondary number (in that order). Are there any other numbers and persons whom you will want us to contact

beyond those numbers?: _____

This application is not complete without signature of the Parent or Legal Guardian, the applicant, to attend this tutoring program. The AIR Program reserves the right to materials developed within the program itself, including research, video and photos for further use. By signing this application, the Applicant and Parent /Legal Guardian gives their consent to the AIR Program to use such materials within the scope of the program for present and future use.

Signature of Parent or Legal Guardian: _____ Date: _____



AIR Programs
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