



ENROLLMENT AND CLASS LEVEL CERTIFICATION FORM HACU SCHOLARSHIP PROGRAMS

To The Student: Write your name below and ask a school official (i.e., Academic Advisor or Registrar's Office) to complete the form as indicated. **This Form must be returned to HACU by JUNE 12, 2009**

Applicant Information

Name

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Last

First

MI

To The School Official Submitting The Certification:

The student named above is applying for consideration in the Hispanic Association of Colleges and Universities' (HACU) scholarship program. The goal is to recognize outstanding students attending a college or university.

Please complete this form verifying the **enrollment status** and **class level** of the applicant mentioned above. You may be contacted to verify this information.

This is to certify that _____ is currently a student enrolled at _____
Name of Student Institution's Name & Campus

for _____ credit hours during the _____ semester and intends to enroll _____
of credits Current Semester Full-time/Part-time

for the _____. The student is currently classified as a _____ in their studies
Upcoming Semester i.e., sophomore, junior, etc.

leading to a _____ degree in _____. The student's expected
i.e., AA, BA, BS, MA, PhD., etc. Major

graduation date is _____.
Month/Year

This petition is filed on behalf of the student mentioned above on _____.
Date

Please complete the following contact information:

Name of School Official Completing Form Title

Signature of School Official Date

Mailing Address

City State Zip Code

(____) _____ Ext. _____
Phone Number E-mail

Please mail completed forms by JUNE 12, 2009 to:
Design Your Future Program
HACU National Headquarters
8415 Datapoint Drive Suite 400
San Antonio, TX 78229

