

## **Vedic Studies Student Application**

			Applic	ant Info	ormation			
Full Name:	Last	First			M.I.	Date:		
Address:  Street Address						Apartment/Unit	#	
_	City					Country		
Phone:				Email:				
Program A <sub>l</sub>	pplying For:							
Are you a citizen of Aruba?			YES	NO	If no, are you	authorized to work/study?	YES	NO
Do you have your own source of income?			YES	NO	If yes, how?			
Have you a	Have you applied for student aid before?			NO	If yes, explain	n:		
				Educati	on			
ligh School:	gh School:				Location:			
rom:	om:To:		Did yo	u graduat	e: YES NO	Diploma:		
College:					Location:			
rom:	To:		Did yo	u graduat	e: YES NO	Diploma:		
Other:				_	Location:			
rom·	To:		Did vo	u araduat	e YES N∩	Dinloma:		

Please List Three References:	
Full Name:	Relationship:
Company:	Phone:
Address:	<u> </u>
Full Name:	Relationship:
Company:	Phone:
Address:	<u> </u>
Full Name:	Relationship:
Company:	Phone:
Address:	
Previous Employn	nent (if applicable)
Company:	Phone:
Address:	Supervisor:
Job Title:	_
Responsibilities:	
From: To: Rea	son For Leaving:
May we contact your previous supervisor? YES NO	
Disclaimer and S	Signature
I certify that my answers are true and complete to the bes	st of my knowledge.
If this application leads to employment, I understand that in interview may result in my release.	false or misleading information in my application or
Signature:	Date: