

**Arkansas State University**

# A-State Connection

Minority Recruitment Program

Hosted by the A-State Multicultural Center and Office  
of Recruitment

**Wednesday, April 22, 2015**

**Registration Packet**

Dear Outstanding Junior:

Arkansas State University's Multicultural Center along with the Office of Recruitment will host **A-State Connection**, a minority recruitment program on **Wednesday, April 22, 2015**. **A-State Connection** is a recruitment program for high achieving African American and other minority high school juniors in the Delta area of Arkansas. This will be an exciting and informative day for you to connect to Arkansas State University!

Working closely with other campus departments, you will receive in-depth information about A-State and how to be a successful college student. You will be connected to the university in the following areas: admissions, financial aid, academics, residential life, campus resources, and student life. You will also get the opportunity to meet and hear from our current student leaders and learn more about the student organizations on campus. We are certain that you will enjoy being in Red Wolf Nation!

We hope you will join us for **A-State Connection**. To participate in our recruitment program you must meet the below criteria:

1. **The student should reside in the Delta area of Arkansas**
2. **The student should be African American, Hispanic, Asian American, or Native American**
3. **The student should be a junior matriculating in a college preparatory curriculum with at least a 3.0 cumulative GPA. (Students with at least a 2.75 will be considered for the program with recommendations)**

The Multicultural Center staff is committed to partnering with other campus constituents at Arkansas State University to aid in the recruit and retention of students just like you. We know that **A-State Connection** is one way that we will be able to achieve this.

This registration packet must be received by **Friday, April 10, 2015**. It must be filled out in its entirety AND the parent waiver must be completed. Additional information will be emailed to students beginning April 13, 2015.

Transportation will be provided for those in the selected Delta areas. Participants will receive information on designated pick up areas.

For questions or concerns please call Candence Brooks at 870-680-4052 or email at [candencewilliams@astate.edu](mailto:candencewilliams@astate.edu).

**A-STATE CONNECTION**  
**Wednesday, April 22, 2015**  
**ARKANSAS STATE UNIVERSITY**  
**REGISTRATION PACKET (please write legibly)**

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**GENERAL INFORMATION**

Name \_\_\_\_\_ Male / Female (Circle One)

Date of Birth \_\_\_\_\_ High School \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone Number \_\_\_\_\_ Cell Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_ Parent/Guardian Phone Number \_\_\_\_\_

Are you registered with your high school disability services office? (Circle One) Yes No

**OTHER INFORMATION**

List any known food allergies \_\_\_\_\_

Will you need transportation to A-State Connection? (Circle One) Yes No

Circle your T-Shirt size: Small Medium Large X-Large XX-Large XXX-Large Other \_\_\_\_\_

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**ACADEMIC INFORMATION** (To be completed by your High School Counselor)

Student's Full Name \_\_\_\_\_

Cumulative Grade Point Average \_\_\_\_\_

Class Rank \_\_\_\_\_ ACT/SAT Scores \_\_\_\_\_

I affirm that all the information supplied in this section is complete and accurate.

High School Counselor Signature \_\_\_\_\_ Date \_\_\_\_\_

High School Counselor Phone Number \_\_\_\_\_

**A-STATE CONNECTION  
PARENT CONSENT FORM**

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\_\_\_\_\_ has permission to visit Arkansas State University on Wednesday, April, 22nd, 2015. He/She WILL or WILL NOT (please circle) be riding a bus/van to and from Arkansas State University.

As the parent/guardian, I will have someone at the designated pick-up point before and after the event.

My child, \_\_\_\_\_, understands that while attending A-State Connection including riding on the bus/van, the use of profanity, theft, vandalism, possession of and usage of weapons, and the possession and usage of illegal drugs is prohibited. If my child violates this rule, I understand that they will immediately be released to the University Police department.

We have thoroughly read the personal data form and affirm that all information supplied on this form is complete and accurate. We understand that any misrepresentation of facts could be cause for refusal to participate in A-State Connection.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

In case of emergency, Arkansas State University should contact:

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_

Relation \_\_\_\_\_

**PLEASE MAIL OR FAX THIS REGISTRATION PACKET BACK TO:**

**A-STATE MULTICULTURAL CENTER**

P.O. Box 1018

State University, AR 72467

Fax Number: (870) 972-3237