

Appendix B



Multicultural Center Student Intake



Name: _____
Housing: ☐ on Campus ☐ off Campus
Address: _____
Telephone: _____
Major: _____
Advisor: _____

Student ID #: _____

City, State, Zip: _____

EOU Email: _____

Minor: _____

Expected Graduation Date: _____

Ethnicity Identity:

- ☐ Hispanic
- ☐ Non-Hispanic
- ☐ White, European American
- ☐ Asian American
- ☐ Pacific Islander
- ☐ Hispanic American

- ☐ American Indian/Alaskan Native
- ☐ Black, African American
- ☐ Middle Eastern
- ☐ North African
- ☐ Other _____
- ☐ Decline to Respond

Funding Source:

- ☐ FAFSA Complete
- ☐ EOU Scholarship
- ☐ Alternate Funding
- ☐ Other _____

Please check any or all areas that you would like to receive information or learn more about.

- ☐ Student clubs & Organizations
- ☐ Financial Aid/Scholarships
- ☐ Daycare/Childcare Resources
- ☐ Personal/Peer Counseling
- ☐ Tutoring
- ☐ Mentoring
- ☐ Personal Budgeting
- ☐ Career Services
- ☐ Multicultural Programs and Activities
- ☐ Participate in Recruiting Activities and Public Relations
- ☐ Other _____

Hobbies/Special Interests:

To better provide you with services, the Multicultural Center will maintain information about you as it pertains to your educational goals at EOU. Your signature indicates that you understand this information and grant permission for staff to consult and share your information with campus departments, funding agencies, and/or organizations if necessary.

Signature: _____

Date: _____