

WELCOME TO BLACKS

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Executive Director
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<https://blacksinoregon.com>
4736 Royal Ave., Suite 129
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Where Preparation Meets Opportunity

Student Application Form (BLACKS)

Send application to blacks@blacksinoregon.com

Name _____ Age/DOB _____

Social Security Number _____

Parent/Guardian/Unaccompanied Youth Name(s) _____

Street Address _____ Email Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Cell Phone _____ Work Phone _____

Emergency Notification _____ Phone _____

Physician _____ Phone _____

Insurance Company* _____ Policy # _____

School Information

School Name _____

School Address _____

School Phone # _____ Name of School Counselor _____

Housing Status

Are you in foster care? _____

Have you ever been in foster care? _____

Have you ever been homeless? _____

Have you ever lived with anyone else other than a parent? _____

Do you live in a single-parent home? _____

Race (write yes to all that apply)

Black/African American _____

Native Hawaiian/Other Pacific Islander _____

American Indian/Alaska Native _____

Hispanic/Latino _____

Asian _____

White _____

How did you hear about BLACKS? _____

Name _____ Signature _____

Parent/guardian name _____ Signature _____

Date _____

Send completed application to blacks@blacksinoregon.com