

PERSONAL INVENTORY FORM

NAME: _____

ADDRESS: _____

PERSONAL E-MAIL ADDRESS _____

PHONE: _____

NAME, ADDRESS AND PHONE OF SCHOOL PRESENTLY ATTENDING:

NAME AND ADDRESS OF COLLEGE OR UNIVERSITY PLANNING TO ATTEND:

MAJOR AND MINOR AREAS OF STUDY:

CURRENT OVERALL GPA: _____ GPA IN FIELD OF STUDY: _____

NAME AND ADDRESS OF LOCAL NEWSPAPER:

NAMES AND ADDRESSES OF THREE REFERENCES:

(At least one from your major field of study)

1. _____

2. _____

3. _____

PLEASE ATTACH YOUR TRANSCRIPT, AT LEAST TWO LETTERS OF RECOMMENDATION
AND ANOTHER PIECE OF PAPER THAT DESCRIBES YOUR MAJOR COURSE OF STUDY
AND ANY OTHER ASSISTANCE THAT YOU WILL BE RECEIVING.

SEND TO: Kansas Environmental Health Association
c/o MELISSA HEINRICH
125 West Elm
Salina, Kansas 67401