

Grambling State University Summer Orientation, Advising, and Registration (SOAR) Form

Deadline for submission for "SOAR June 15" is June 9, 2015 @ Midnight

Student Name:					Gender:	Male	Age:
	Last	F	irst	MI		Female	
Address:	Street Name / P. O. Box Number	er	C	ity	State		Zip Code
Home Phone:	Cell Phone:						
mail Address:		ı	Parent Email				
Proposed Major:							
o vou plan on v	vorking while you are in scho				If yes, full-time	P	art-time
		•			,,		
Band Band	cular activities do you plan to Sports Cheerlead		Other:				
<u> </u>	· <u> </u>	g	_ Other				
lame(s) of all at	tendees and t-shirt sizes:	S	M	L	XL	XXL	XXXL
j.							
		C	Orientation F	ee			
ncluding the stu	dent participant, please indi	cate the tot	al number w	/ho will be a	ttending the orie	entation:	
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ć as - chulus			Number	Cost			
\$ 35 – Studen	τ	_				Generation G	
\$ 25 – Guest							
Ś 10 – Person	s age 11 and under						
,							
		TOTAL _					
or more inform	ation please contact:						
Mr. Kevi	in Sly slyke@gra	m.edu	(318) 27	4-2742			

(318) 274-6127

Mrs. Jeanette Moss

mossj@gram.edu