

PUERTO RICAN / HISPANIC YOUTH LEADERSHIP INSTITUTE

COLLEGE SURVEY

Please complete this form if you are a senior graduating from high school:

Name:			
	First Name	Middle Initial	Last
Delegation: _			
High School:			
Email:			
	you have applied to:		
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1			
III. College y	ou plan to attend this fal	l:	
	st-secondary plans		
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2 3.			



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