



Hawk Connection Program Agreement

		Student Information	
Date of Birth:	Month/Day/Year		□ Female
Full Legal Name: _	Fr.	16	7
Mailing Address: _	First	М.	Last
_	City	State	Zip Code
Phone Number:	()	Alternative Number: ()	
E-mail Address:			
Ethnicity:	☐ White/Non Hispanic	☐ Black/Non Hispanic	☐ Hispanic
	☐ Asian/Pacific Islander	☐ American Indian/Alaskan Native	Other
		Degree Information	
Semester and year	you expect to enter UHCL:		
Please Check One	e: 🗆 Fall	☐ Summer ☐ Spring	Year:
Your expected maj	or:		
College Currently A	Attending:		
Have you attended	other colleges/universities other tha	n the one mention above?	□ No
If Yes, please list th	nem in the space provided:		
participants com participating con the university in By signing, you (plete the correct courses for the nmunity college. Participants mu the future. (the student) agree that you have	rantee admission to UHCL, it only guarantee ir intended Bachelor degree program for UH ist still satisfy the UHCL minimum admission thoroughly read the Hawk Connection Programming with those guidelines and polices.	I-Clear Lake while being enrolled at the n standards when they officially apply to gram Guidelines, and understand that for
	Student Sign	nature	
The	following section MUST be	completed by a UHCL Transfer Advis	or for Agreement to be valid.
	Hawk Connection		University of Houston
	UH-Clear Lake Academic Transf	Date Clear Lake	

2700 Bay Area Blvd. Houston, TX 77058 www.UHCL.edu