



LAREDO COLLEGE
HOMELAND SECURITY STUDIES PROGRAM- HSSP
APPLICATION FORM

The information requested on this form is needed to ensure that all applicants for the HSSP receive impartial consideration. Be complete and accurate with the responses to these questions. Incomplete applications **will not** be considered.

Legal Name _____
Last First Middle Maiden Name

Address _____
Street City State Zip Code

Mailing Address _____
Street City State Zip Code

LC P-ID _____ SSN _____ LC Passport E-mail _____@students.laredo.edu

Alternate E-Mail _____ Home Phone (____) _____ Cell Phone (____) _____

U.S. Citizen Yes ___ No ___ If no, give country of citizenship _____ D.O.B. _____

Emergency Contact _____ Phone number (____) _____

Currently enrolled at LC TAMIU OTHER _____

Please send **completed** application to the email associated to the program.: homelandsecurity@laredo.edu

EQUAL OPPORTUNITY STATEMENT

Laredo College adheres to the Equal Educational Opportunity Policy <https://pol.tasb.org/Policy/Code/1207?filter=FA> as stated in the current Manual of Policy.

I understand that falsifying any information on the HSSP Program application or while in the program will jeopardize my admission or standing in the Homeland Security Studies Program.

Signature _____ Date _____