



Eastern Kentucky University Alumni Association Information Sheet

Social Security Number _____

Please Print

Name _____
First Middle Last

Preferred First _____
Other names under which records may be listed

Home Address _____
Street

City State Zip

Phone (____) _____

Marital Status: M____ S____ Spouse Name _____ Spouse ECU Grad? Yes ____ No ____ Year _____

If ECU Grad, Spouse Name at Graduation Spouse Social Security Number

Graduation Class: Spring Summer Fall Year _____

Degree received from ECU _____ Please list name at time each degree was received

Current College: _____ Major _____ Degree _____ Name _____

Please list other degrees received from ECU
Previous
Degree _____ Major _____ Degree _____ Name _____

Previous
Degree _____ Major _____ Degree _____ Name _____

Please give parents' address and one other persons' address who will always know how to contact you

Referral's Name _____

Referral's Name _____

Address _____

Address _____

City State Zip

City State Zip

(____) _____
Phone Relationship

(____) _____
Phone Relationship

Signature

Date

Please See Other Side