

Alicia Brown
College & Career Planning
STUDENT INFORMATION

Today's Date: _____

Student Name: _____ Birth Date: _____ Age: _____

Student Phone: Home: _____ Cell: _____

Parent Name(s): _____

Parent Phone: Home: _____ Cell: _____

Address: _____

Email- Student: _____ Parent: _____

Can I contact you via text to schedule a meeting? Yes or No Via email: Yes or No

Current high school: _____ Grade: _____

What do you like to do in your spare time? _____

Please list as many jobs as you can think of that you could possibly see yourself doing one day:

What do you currently plan to do after high school? (Please circle).

4 year college 2 year college technical school military work not sure

What do your parents or guardian want you to do after you graduate?

How certain are you of what you want to do after high school? (Circle a number)

Very Certain

Totally guessing

1 2 3 4 5 6 7 8 9 10

Please list colleges/universities (if you have any) that you are interested in:

Please use the back to tell me anything else you would like for me to know about you. Thanks!