Carson-Newman Alumni Association Biographical Data
(Please Print All Information)

Name: _____
First Middle Last

Maiden Name (if applicable): _____ Permanent E-mail: _____

Permanent Address: _____ _____
Street City State Zip Code

County: _____ Contact Phone: _____

Marital Status: _____ Marriage Date (M/D/Y): _____
Name of Spouse: _____ Is your spouse a C-N alum? If yes, what year? _____

If you have children, please list their names and birthdates: _____

Are you a first generation college graduate? _____
Are you an alumni legacy family (more than one generation attending/graduating from C-N)? _____

List any relatives who graduated from C-N and their relationship to you. (For example- Joe Smith/brother):

_____

What's next?
Graduate School Plans – If yes, where? _____
Career Plans – Job Title/Name of organization and location? _____

C-N Activities in which you were involved:
Please print all information. Use complete formal name of organization/club/group when describing activities. (Example – Psi Chi not Psychology Club, Alpha Kappa Psi not Business Fraternity, Student Nurses Association not S.N.A.)

Awards and Honors:

_____

Leadership Positions:

_____

Honor Societies:

_____

Professional Societies:

_____

Social/Service Societies:

_____

Athletics:

_____

Ensembles:

_____

Other Organizations:

_____