



SAINT FRANCIS SCHOOL

ALUMNI QUESTIONNAIRE

PERSONAL

DATE: _____

Name: _____ Graduation Year _____
Address: _____ Apt. _____
City: _____ State: _____ Zip: _____
Email Address: _____
Telephone #: _____ Cell #: _____

EDUCATION

College or Post Secondary Program Attended:

of Years: _____ Major: _____
Class of: _____ Post College Program: Y / N
Did you play sports? Y / N If yes, please describe: _____
Please list any recognition awards or honors:

CAREER

Employed By: _____

Title: _____ Location: _____

Hobbies: _____

Are you married? Y / N Name of spouse: _____

of Children: _____ Names: _____

INFORMATION

- May we publish your contact info on our Alumni page? Y / N
- May we publish your comments in our school newsletter? Y / N
- I would like to help with Alumni Activities: Y / N
- I would prefer not to be contacted again by Saint Francis High School. Please remove my name from your contact list.

***We sincerely appreciate your response . Please feel free to contact
Alumni@stfranschool.com with updates or comments.***