COLLEGE OF DUPAGE FORENSICS CONTACT/INFORMATION SHEET

TODAY'S DATE:

NAME:	
HOME ADDRESS:	
HOME PHONE:	
WORK PHONE:	
OTHER PHONE(S)	
(specify):	
E-MAIL ADDRESS:	

SOCIAL SECURITY NUMBER:

(For use in determining eligibility and to process things like food money! Not to worry — at no time will your SSN be given to anyone outside the coaching staff, who will use it for forensics purposes only.)

EXPECTED GRADUATION/TRANSFER DATE FROM C.O.D.:

Please let us know in the table below what your availability would be for team meetings, group coaching sessions and other forensics activities. Place an "X" in the boxes that indicate the times you would NOT be available.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
8:00							
9:00							
10:00							
11:00							
12:00p							
1:00							
2:00							
3:00							
4:00							
5:00							
6:00							
7:00							
8:00							
9:00							

I AM INTERESTED IN (CIRCLE ALL THAT APPLY):

PUBLIC SPEAKING ORAL INTERP/ACTING DEBATE LIMITED PREP EVENTS EVENTS (IMPROMPTU, EXTEMP)