

FORENSIC CONFERENCE STUDENT INFORMATION (page 2 of 5)

Your Name _____

Your Email _____

Address _____

Phone # _____

Emergency Contact name/phone number _____

Field of Study _____

Spring 2008 Classes _____

Fall 2008 Classes _____

Degrees or Certificates completed _____

Clubs/Organizations involved with _____

Hobbies, Skills, Interests, Achievements, etc _____

I, the undersigned agree to the best of my ability and good health, to enroll (as noted on included Program Advisor information) in the Fall of 2008 at MCC.

X _____ Date _____