

South Western Alumni Association Information Update Form

*Name (Include Maiden Name): _____

*Address: _____

*City, State Zip: _____

Home Phone: _____

*Graduation Year: _____

Parent's Name: _____

Place of Employment: _____

Address of Employment: _____

Job Title: _____

Job Description: _____

Hobbies, Special Interests, Clubs, Organizations, Honors, Awards, Etc.

Continued Education (Please list degree and institution)

Military Service: _____

Spouses Name: _____

Is he/she a South West Graduate? : _____

If yes, what year?: _____

Children (Please list name and birthdate)

Please circle the committee(s) you would like to serve on for the Alumni Association

By-Laws - Archives - Social - Fundraising

Please list any activities you would like to see the Alumni Association provide

**Required Items*