

**Career and Technical Education
Student Contact Form**

INFORMATION ABOUT YOU

Name(s) _____

High School _____ **Graduation Year** _____

Address _____

Street _____ City _____ State _____ Zip _____

Telephone (____) _____ - _____ **Email** _____

Do you expect any of this information to change within the next year?
If yes, please include any expected changes:

Name _____

Address _____

Telephone _____

Email _____

PEOPLE WHO WILL ALWAYS KNOW HOW TO CONTACT YOU AFTER GRADUATION

Parent(s)/Guardian(s)

Name(s) _____

Address _____

Street _____ City _____ State _____ Zip _____

Telephone (____) _____ - _____ **Email** _____

Relative(s)

Name(s) _____

Relationship to you _____

Address _____

Street _____ City _____ State _____ Zip _____

Telephone (____) _____ - _____ **Email** _____