

## SENIOR SEMINAR FOCUS PERSON QUESTIONNAIRE

Your name:

If you are not the focus person, please write the focus person's name:

Your relationship to the focus person:

Please provide a brief description (a few sentences) about your relevant personal or family history that you would want students to know:

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Please identify up to 3 issues that are important to you and that impact you:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Please check which semester(s) you are interested in volunteering for (check both if you are interested in both)

Fall Semester    Spring Semester

Contact information - Please indicate your preferred way for us to reach you (with a check or 'x') and the appropriate information:

Cell Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Other: \_\_\_\_\_