

NAME _____ COURSE TITLE _____

ADDRESS _____ DATE _____

ZIP _____ PHONE _____

1. WHAT IS YOUR EDUCATIONAL BACKGROUND (ACADEMIC STATUS, &C);
GRADUATED FROM WHAT SCHOOL, WHAT MAJOR FIELD OF INTEREST?
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2. WHAT IS YOUR PRESENT MAJOR FIELD OF STUDY OR INTEREST?
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3. WHAT IS YOUR CHIEF INTEREST IN TAKING THIS COURSE?
SPECIFICALLY, WHAT DO YOU HOPE TO GET FROM THIS COURSE?



WILLIAM PACKARD