

ADRIAN COLLEGE
ALUMNI ASSOCIATION BOARD OF DIRECTORS

Nominee
Biographical Information

Full Name _____ Class Year _____

Preferred First Name _____

Degree & Major/Minor _____

Title or Position _____ Employer _____

Preferred Email _____ Mobile Phone _____

Address _____

City/State/Zip _____

Hometown _____

Additional Degrees _____

Spouse's Name _____ AC Grad? Class Year? _____

Children's Names/Ages _____

Civic, athletic, social, club affiliations as a student at Adrian:

Civic, athletic, social, club affiliations as an alumnus/na:

Additional information you'd like us to know about you: (Awards or recognition through work or volunteer activities)

What do you feel you could contribute to the Alumni Board?