

Date \_\_\_\_\_

## ILLINOIS STATE UNIVERSITY ALUMNI ASSOCIATION

### Biographical Data Form

It is understood that this form, as completed, will be treated confidentially in its use by the Alumni Awards Committee and the Alumni Relations office and that any decision made by the committee, which shall be made pursuant to the regulations of the Alumni Association, will be final.

Please complete all sections that apply.

Name \_\_\_\_\_ Maiden Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Date of Birth \_\_\_\_\_ Birth Place \_\_\_\_\_

Marital Status \_\_\_\_\_ Spouse's Name \_\_\_\_\_

If spouse is an alum: Class Year \_\_\_\_\_ Maiden Name \_\_\_\_\_

### Attendance at Illinois State University

	Years	Major/Minor	Degree	Date Awarded
Undergraduate	_____	_____	_____	_____
Graduate	_____	_____	_____	_____
Advance degree	_____	_____	_____	_____

### Attendance at other universities or colleges

School	Years	Major	Degree	Date Awarded
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**Career since leaving ISU (If enclosing a resume or curriculum vita, please proceed to page 3.)**

**Please list in reverse chronological order, beginning with present position:**

<b>Employer</b>	<b>Position</b>	<b>Year(s)</b>	<b>Main Responsibilities</b>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**Professional and Civic Organization memberships and offices (including dates):**

---

---

---

---

---

**Awards and honors (including date and awarding agency):**

---

---

---

---

---

**Professional/Community Service:**

---

---

---

---

---

**Patents, Publications, Discoveries:**

---

---

---

---

---

