

New Alumni Contact Form

Alumni Affairs



Personal Information

Full Name :

Date of Birth :

Gender : Male Female

Address

City, State, Zip: Phone :

Email :

Occupation :

Job Title :

Your Time At Ellsworth

Program of Study

Year graduated or attended

Did you participate in athletics? If Yes, what program?:

What clubs did you participate in:

Can we highlight you on our social media pages? Yes No

Do you wish to receive our Newsletter? Yes No

email form to eccalum@ivalley.edu