

# COLLEGE OUTREACH



*SIGN-UP*



Please provide the following information:

Student's Name: \_\_\_\_\_

Circle Year:     Freshman     Sophomore     Junior     Senior

Date of Birth: \_\_\_ / \_\_\_ / \_\_\_

College Name: \_\_\_\_\_

Student/College mailing Address -

Street \_\_\_\_\_ Apt/Box \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Student's Email Address: \_\_\_\_\_

Parent's Email Address: \_\_\_\_\_

A donation of \$25 to the College Outreach Fund is greatly appreciated to offset the cost of  
packages and postage!

Please return this completed form to the Temple office  
as soon as your student has established  
their address for the school year!