

COLLEGE OF BUSINESS STUDENT RECOGNITION INFORMATION FORM (*Please type or print LEGIBLY*)

Name _____ Hometown ____ ISU UID # Local Address City, State, Zip _____ Local Phone _____ E-Mail _____ Senior Junior Sophomore Freshman Major When do you expect to graduate? Month _____ Year _____ Total ISU Hours Completed _____ Total Transfer Hours Completed Parents' Name(s) Parents' Address(es) City, State, Zip **COLLEGE ORGANIZATIONS:** *Please list those organizations that are most important.* 1. _____ 2. ____ 3. 4. ____ * COLLEGE HONORS RECEIVED: Please list those honors that are most important. AWARD DATE

1	2
3	4
5	6

***OTHER ACTIVITIES (On and Off Campus):** Please list those activities that are most important.

	ACTIVITY	DATE	
1		2	
3		4	
5		_ 6	

Is there anything else you would want said about you at the Recognition Program?

*Additional information may be included on a separate sheet.

Please state any work experience while enrolled in the University:

What are your career objectives?

For what reason did you decide to pursue this career?

Other than classroom work, in what ways are you preparing yourself to achieve your career objectives?