

# REUNION SURVEY

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

## HOME INFORMATION

Home Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Home Phone: \_\_\_\_\_  
Home E-mail Address: \_\_\_\_\_

## BUSINESS INFORMATION

Business/Firm Name: \_\_\_\_\_  
Business Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Business Phone: \_\_\_\_\_ Business Fax: \_\_\_\_\_  
Business E-mail Address: \_\_\_\_\_  
Area(s) of practice: \_\_\_\_\_

Licensed to practice in the state(s) of: \_\_\_\_\_

Professional/Extra Profession Activities: *(such as teaching, board representation, volunteer work, community services, etc.)*  
\_\_\_\_\_  
\_\_\_\_\_

Other Interests: *(sports, hobbies, outdoor activities, travel, etc.)* \_\_\_\_\_

Family/Relationship Information: *(spouse, children, grandchildren, etc.)* \_\_\_\_\_

Other information you would like to share about yourself and what you have been doing since graduation:  
\_\_\_\_\_  
\_\_\_\_\_

Fondest or Funniest Law School Memory: \_\_\_\_\_

My most rewarding experience since graduation was: \_\_\_\_\_

What types of Alumni Activities would you be interested in: \_\_\_\_\_

Message to your classmates: \_\_\_\_\_

Yes

No

I would like this information to be including in the reunion booklet.