

### New Initiate Information

### Alpha of Clovia Alumni Association

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

Permanent Address: \_\_\_\_\_

\_\_\_\_\_

County: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Year graduated from K-State or will graduate from K-State: \_\_\_\_\_

Major: \_\_\_\_\_ Minor: \_\_\_\_\_

Future Plans - include new address, employer, or title at employment if known:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Outside Interests: \_\_\_\_\_

\_\_\_\_\_

#### **Clovia Information:**

Year Entered the House: \_\_\_\_\_ Number of Years lived in the House: \_\_\_\_\_

Big Sis: \_\_\_\_\_

Little Sis: \_\_\_\_\_

\_\_\_\_\_

#### **Personal Information (if applicable):**

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

Husband's Name: \_\_\_\_\_

**Contact Information: provide the name and address of two people who will always be able to furnish the Alumni Association with your current address, phone #, or email:**

1. \_\_\_\_\_

\_\_\_\_\_

2. \_\_\_\_\_

---

***Please return to the House President or Vice-President before May 17.***