

QUESTIONNAIRE

Last Name	First Name		Middle Initial
Street Address	City	State	Zip
Home Phone Number	Cell Phone Number FAX Number		Email Address
How Many Years Were You At OU?	What Year Did You Graduate from OU?	Wha	: Was Your Major:
Sport (s) Played While At OU			
High School Attended	City/State of High School		Year Graduated
Jr. College or Trade School Attended	City/State of Jr. College or Trade School		Year Graduated
Past Employer	City/State of Employer	Ном	Long at This Job?
Past Employer	City/State of Employer	Ном	Long at This Job?
Past Employer	City/State of Employer	Ном	Long at This Job?
Preferred Employment Interests			
Are You Willing to Relocate?			
Date of Availability			
Are You Open-Minded As To Type of	of Job?		