Parent Communication Form

To be completed by parent or guardian.

This form can also be completed online at www.saintleo.edu/pcf

STUDENT INFORMATION

*Full Name _____ *Birth Date _____/ _____/_____

*High School _____ ☐ Public ☐ Private

*Is your student transferring from another college? ☐ Yes ☐ No

If yes, he/she is entering Saint Leo University as a: ☐ Freshman ☐ Sophomore ☐ Junior ☐ Senior

PARENT 1 INFORMATION (Please complete both parent sections)

Please circle to indicate relationship to student: Mother / Father / Step-Mother / Step-Father / Legal Guardian / Grandmother / Grandfather

Full Name _____ Preferred First Name _____

*Street Address _____

*City _____ *State ____ *Postal/Zip Code _____ *Country _____

*Employer _____ *Job Title _____

Business Address _____

City _____ State _____ Postal/Zip Code _____ Country _____

Undergraduate University _____ Year Graduated _____

Other Degrees, Class Years and Universities _____

_____

*Home Phone _____ *Cell Phone _____ Work Phone _____

*Preferred E-mail _____

PARENT 2 INFORMATION (Please complete both parent sections)

Please circle to indicate relationship to student: Mother / Father / Step-Mother / Step-Father / Legal Guardian / Grandmother / Grandfather

Full Name _____ Preferred First Name _____

Check here if address is same as above ☐

*Street Address _____

*City _____ *State ____ *Postal/Zip Code _____ *Country _____

*Employer _____ *Job Title _____

Business Address _____

City _____ State _____ Postal/Zip Code _____ Country _____

Undergraduate University _____ Year Graduated _____

Other Degrees, Class Years and Universities _____

_____

*Home Phone _____ *Cell Phone _____ Work Phone _____

*Preferred E-mail _____

We want to be sensitive about how we communicate with you. Please indicate any special circumstances here: _____

_____

* Required items

(Please continue on reverse.)

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OPTIONAL INFORMATION

Please list any business and civic boards or organizations to which you belong.

Please list any volunteer boards on which you have served.

Please list any significant former professional positions you have held.

CHILDREN

Please list your other children who have attended Saint Leo University.
Full Name / Birthdate / Class Year

OTHER RELATIVES

Please list any relatives who have attended or worked for Saint Leo University.
Full Name / Birthdate / Affiliation (alumnus, employee, etc.):