

Math 1113 Student Information Sheet

Course & Section:	Semester:	Year:
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Personal Information (indicate which name you prefer to be called)

Name:	Email:
SS#:	Phone #:
Local Address:	EGC Advisor
Current GPA:	Major:

High School Information

Name of High School:		
City, State:	Year Graduated:	Math CPE score:

Math Courses	Year Taken	Grade A,B,C,D,F

College Information

Math Courses	When Taken	Instructor	Grade A,B,C,D,F

Other information:

I have read and understand all the policies and procedures as stated in the course syllabus and agree to abide by them.

signature

date