

SAGE COLLEGES *Alumni* 2009 SURVEY

Please complete the information below to ensure you receive information regarding alumni programming.

Name _____
First Middle or Maiden Last

Did you attend _____ JCA _____ Class year _____
_____ Sage College of Albany
_____ Sage Graduate School

Birthdate _____

Preferred Mailing Name _____

Home Address _____

Phone _____ Fax _____ E-mail _____

Seasonal Address (dates from _____ to _____) Seasonal Phone _____

Employer _____ Title _____

Business Address _____

Phone _____ Fax _____ E-mail _____

Graduate Degree _____ Year Received _____ College/University _____

Spouse /Partner

Name _____
First Middle Last

Nickname _____ Birthdate _____ Wedding Date (if applicable) _____

Employer _____ Title _____

Business Address _____

Degree _____ Year Received _____ College/University _____

Children *Name Birthdate M/F School(s) Attended*

Relatives who attend or have attended JCA, Sage College of Albany, or Sage Graduate School:

Name

Relationship

Date of Graduation

Would you be interested in taking part in Alumni Events and if so, what events would you like to see offered?

- | | | |
|------------------------------------------------|-------------------------------------------------|-----------------------------------------------|
| <input type="checkbox"/> Happy Hours/ Socials | <input type="checkbox"/> Day Trips | <input type="checkbox"/> Volunteering Events |
| <input type="checkbox"/> Sporting events | <input type="checkbox"/> Speakers on Campus | <input type="checkbox"/> Educational/Cultural |
| <input type="checkbox"/> Networking and Career | <input type="checkbox"/> Art shows and Exhibits | |

For planning purposes, please check the times which are most convenient for you to attend an event:

- | | | |
|---------------------------------------------|----------------------------------------------|--------------------------------------------|
| <input type="checkbox"/> Monday evenings | <input type="checkbox"/> Thursday evenings | <input type="checkbox"/> Saturday evenings |
| <input type="checkbox"/> Tuesday evenings | <input type="checkbox"/> Friday evenings | <input type="checkbox"/> Sunday afternoons |
| <input type="checkbox"/> Wednesday evenings | <input type="checkbox"/> Saturday afternoons | <input type="checkbox"/> Sunday evenings |

Would you be interested in helping plan future alumni events in your area? If so, how can we best contact you?

Would you like to be included in our Alumni Admissions Program to recruit prospective students? If so, how can we best contact you?

In an effort to “go green” please provide us with an email address so that we may contact you electronically

***Please complete and return to:
Sage College of Albany
Office of Alumni Relations
c/o Alicia Pepe, Director Alumni Relations SCA/SGS
140 New Scotland Avenue
Albany, NY12208***

Survey forms may also be completed online at www.sage.edu/sca/alumni or www.sage.edu/sgs/alumni