WOMEN'S STUDIES
Student Information Sheet

Today's Date_____

Check one:

___Major **___Double Major** **___Dual Major** **___Minor** **___Grad Certificate**

Name:_

Primary E-mail address:

UConn ID #:
(PeopleSoft #)

Expected Date of Graduation:

Local Address:
(street *city* *state* *zip code)*

Cell/Local Phone:

Permanent Address:
(street *city* *state* *zip code)*

Phone:_____
area code

Primary Major: Advisor:

Secondary Major: Advisor:

Minor: Advisor: