

## **Student Contact Information**

**Full Name:**

**Name you wish to be called:**

**Preferred e-mail address:**

*Note: I will use e-mail to communicate important information to the class. Please give me the address to the account that you check most often.*

**Preferred phone number:**

Room:

Cell:

**On campus address:**

**Permanent address:**

I will be making a contact information list for the students in the lab that will include e-mail addresses and phone numbers. Please check one of the following:

- I give permission for my e-mail address and phone number to be distributed to the other members of the lab.
- I do not wish my e-mail address and phone number to be distributed to the other members of the lab.

I agree that the contact list for the class is to be used for the academic purposes of the class only.

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Name (print)

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Signature

Date