Student Information Sheet

First Day of Class

Course Title: _______________________________________________________

Print Name: ________________________________ Date: ___________________

ELAC Email: _______________________________ Phone #: __________________

Signature: _________________________________ Initials: __________________

1. What profession are you pursing?
_________________________________________________________________
_________________________________________________________________

2. What is your major and career goal?
   a. ______________________________________________________________
   ______________________________________________________________

   b. What other courses are you enrolled in this semester?
_________________________________________________________________
_________________________________________________________________

3. Since you will be pursuing a career in ________________, what intrigues you the most with regards to the profession?
_________________________________________________________________
_________________________________________________________________

4. What is a favorite attribute of your job, hobby, or school life that inspires you to excel?
_________________________________________________________________
_________________________________________________________________

5. What are your understandings/expectations of this course?
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________

6. Are there any interesting topics in this course that you are highly interesting in discussing?
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________
7. Please share any concerns/questions that pertain to your success in this class.

_____________________________________________________________________________

_____________________________________________________________________________

_____________________________________________________________________________

8. Name several attributes that you have that you are very proud of and that assist you in your success.

_____________________________________________________________________________

_____________________________________________________________________________

_____________________________________________________________________________

9. What can your instructor provide to ensure that your academic needs are being met?

_____________________________________________________________________________

_____________________________________________________________________________

_____________________________________________________________________________

Optional: Class Schedule

<table>
<thead>
<tr>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
<th>Saturday</th>
<th>Sunday</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

“Good teachers weave a life-giving web between themselves, their subjects, and their students, helping their students learn how to weave a world for themselves. - Parker Palmer