

# Fort Cherry Alumni Survey

Name

Year of Graduation from FCHS

Did you attend college or a post-secondary school?  Yes  No

If yes, what school did you attend?

Highest Degree Received?

Profession

Marital Status

Do you have any children?  Yes  No If yes, how many?

E-mail address

Do you wish to have your email placed on the web site?  Yes  No

Street Address

City

State

Zip Code

Phone Number

Please list any Extra-Curricular Activities you were involved with in high school below

If possible, please list your class officers. If you don't know, please leave blank

President

Vice - President

Secretary

Treasurer