

NOLAN CATHOLIC HIGH SCHOOL

Alumni Information Update

Office Use Only:	
RE _____	Shield Info _____
E-Trumpet _____	E-News _____

Graduation Information

Name: (First, Middle, Maiden, Last)		Preferred Name:	
Address:		City, State, Zip:	
Home #:	Business #:	Cell #:	
E-Mail Address:		Class of:	DOB:

College/University Information

If Currently Attending College:

College/University:		College/University:	
Year of Graduation:		Address:	
Degree:		City, State, Zip:	
Major(s)/Minor:		Phone:	
Sorority or Fraternity:		How long will you be at the above address?	

*If you have attended/are attending Graduate School, please include this information on the back of this form.

Employment Information

Employer:		Profession:	
Title/Position/Specialty:		Does your employer match gifts?	
Business Address:		City, State, Zip:	

Military Information

Branch:	Rank:	Position:	Dates of Service:
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Awards/News/Honors/Births/Etc. (Please note on the back of this form.)

Spouse Information

Child(ren) Information (Names/DOB/NCHS Alum)

Name:			
Spouse NCHS grad? If yes, class of:			
Employer:			
Title/Position/Specialty:			

Parent Information – Father

Parent Information – Mother

Name:		Name:	
Address:		Address:	
City, State, Zip:		City, State, Zip:	
Preferred Phone:		Preferred Phone:	
Email:		Email:	

Grandparent Information – Paternal

Grandparent Information – Maternal

Name:		Name:	
Address:		Address:	
City, State, Zip:		City, State, Zip:	
Preferred Phone:		Preferred Phone:	
Email:		Email:	

If Catholic, parish name:	Grade school attended:
Activities you were involved in while at NCHS:	
List relatives who have attended/attending NCHS: <small>(Please indicate Relationship and Class Year)</small>	