EDUC 1300 Student Information Sheet

Name:	
Phone Number(s):	
Personal Email Address:	
How many classes/hours are	you currently enrolled?
Do you work? Yes No	If so, how many hours per week?
Do you have a reliable interr	net connection? Yes No
Do you have a back-up inter	net connection if your first option fails? Yes No
How will you be accessing yo	our classwork? (Select all that apply)
Laptop	
Desktop computer	
Chromebook	
iPad	
Tablet	
Cell Phone	
Other:	
In case of an emergency, who	o should we contact:
Name:	Phone Number: