

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 internet connection? Yes No

Do you have a back-up internet connection if your first option fails? Yes No

How will you be accessing your classwork? (*Select all that apply*)

Laptop

Desktop computer

Chromebook

iPad

Tablet

Cell Phone

Other: _____

In case of an emergency, who should we contact:

Name: _____ **Phone Number:** _____