Personal Data Sheet (Form 1)

Please type or print <u>LEGIBLY</u>. Information from this sheet will be transferred to computer disk by department. Submit this form in the first two weeks of you first semester <u>at LSU</u>. Attach a current C.V.

DATE:				
Address:				
Stre	et Address	City	State	Zip
Phone Number: ()	(home) / ()	(other)
E-mail Address:				
Degree Sought:				
Major:				
				·
Committee Member	ers:			
Skills:				
Language:				
Computer (be spec	ific—programming ab	oility, familiarity with ce	ertain software/h	ardware, etc.):
Field Experience:				
Teaching:				
Area Studies:				
Current semester c	ourse work:			
Course Number	Course Name	Meeting	<u>Hours</u>	<u>Instructor</u>