

**THADDEUS STEVENS ALUMNI ASSOCIATION**

**Biographical Information  
Class of 1960**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

E-mail address: \_\_\_\_\_

Name of Spouse \_\_\_\_\_ Children \_\_\_\_\_

Graduation Year \_\_\_\_\_ Shop \_\_\_\_\_

Other education information and degrees \_\_\_\_\_

Career history / employment information (titles and dates) \_\_\_\_\_

Professional & community organizations you have been or are involved in:

Special Interests: \_\_\_\_\_

How did Stevens make a difference in your life?

Was there an instructor who made an impact on you? Why?

*Please return this form by March 22, 2010 to:*

*Stevens Alumni Association, 740 East End Avenue, Lancaster, PA 17602, Attn: Sophie Weibel*