

Dear Entering the College Zone Student Alumni Participants:

Thank you for one of our past Entering the College Zone (ECZ) one-day events. In order to continue to serve our students and improve upon the services provided, we are interested in hearing from you regarding your experience with ECZ. Additionally we'd like to know what additional services we can provide for you if needed. Please complete the form below and mail to:

Entering the College Zone
c/o BCDI-Atlanta
2545 Benjamin E. Mays Drive, SW
Atlanta, GA 30311

You may also fax to Dawn Cooper's attention (with cover page) at 404-657-0336. Finally, you may email dawn.cooper@usg.edu to request an email copy of this form. Please respond so that we may better serve you and your fellow middle school peers. We look forward to hearing from you soon.

Sincerely,
BCDI-Atlanta

**ENTERING THE COLLEGE ZONE
ALUMNI FEEDBACK FORM**

1. What year did you participate in Entering the College Zone? _____
2. Did you enjoy your experience at Entering the College Zone? Yes _____ No _____ Why or why not?

3. What part of Entering the College Zone was most helpful to you?
_____ College Student Panel
_____ College Tour
_____ Building a High School Plan Workshops
_____ Researching Colleges and Careers on the Internet Workshops
_____ Career Role Model Luncheon
_____ Other: _____
_____ Other: _____
_____ Other: _____
4. What have you or your parents done as a result of what you learned or experienced at Entering the College Zone?

5. What additional follow-up services would be helpful to you?

6. Are you currently in high school? Yes _____ No _____ If so, what High School do you attend? _____
7. If in High School, what grade are you in? _____
8. Are you taking a College Preparatory Curriculum? Yes _____ No _____
9. Are you currently in college? Yes _____ No _____ If so, what college do you attend? _____
10. Have you applied to any colleges? Yes _____ No _____ If so, which colleges?

11. Please provide us with your updated contact information for you and your parents.
Student Name: _____ Parent Name: _____
Address: _____ Address: _____

Phone: _____ Phone: _____
Email: _____ Email: _____