

Level of Interest: Very Interested Somewhat Interested Not at All

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Mobile Number: () _____

Email: _____

Parent/Guardian First and Last Name: _____

Parent/Guardian Email: _____

High School: _____ Grad Year: _____

Tech Center / Career Center: _____

GPA: _____

* By providing your information on this form, you are granting consent to receive phone calls and/or text messages from Davenport University at the phone number(s) provided.