

Tech Profile Sheet

Name _____ Today's Date _____

Address _____

City _____ Zip Code _____

Phone # _____ Other Phone #/Pager _____

Current School _____ High School _____
(if not current school)

Grade _____ Graduation Year _____

Birth Date _____ Social Security No. (optional) _____

E-Mail Address _____

Do you have a Job? Yes No

Where? _____

Work Phone No. _____

Do you have regular hours? If so, when? _____

Please list other activities. (Such as sports, music, scouts, and church related activities)

What are your goals in volunteering with BEC-TV? (Also, what Can we do to help you Achieve your goals?)

Note: This form simply expresses your interest in becoming a BEC-TV volunteer and does not obligate you to anything. Completed form can be returned to BEC-TV (at VVMS) via interschool mail, BEC-TV (c/o VVMS) 8900 Portland Ave Bloomington, MN 55420 Questions? Call 952/681-5900