

Counselor Information Card

High School Name: _____ **Tier #:** _____

Address: _____

Web Address: _____

Phone Numbers: _____

Fax Number: _____

Counselor(s): _____

E-mail Address: _____

Counselor prefers to be contacted through: E-Mail Letter Phone Fax

Private Visits: YES NO

Access to Web Portal: YES NO

Counselor Visits: YES NO

Visit to Campus: YES NO

Workshop Request: YES NO

Newsletter: YES NO

Requests On-Site Admissions: YES NO **Enrollment Reports:** YES NO

Materials Requested:

Applications View books Visit Brochures CD-Roms Scholarship Information

Additional Notes: