

## QUESTIONNAIRE

ALUMNAE CLUE
Alumnae Survey
(Date)

First (Middle/Maiden) Last  ADDRESS: (If address label is incorrect, please make correction here.)  (Alumnae Relations Office will label and mail.)  PHONE: Home Work  POCCUPATION:  Position Title  EMPLOYER:  /OLUNTEER ACTIVITIES:  Are you interested in organized alumnae club activity in? YesN			<u>(Dat</u>	<u>e)</u>				
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Position Title  EMPLOYER:			(Alumnae Relations Office	e will label and ma	il.)			
Position Title  EMPLOYER:	PHO	NE: Home (	)	Work <u>(</u> )				
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B. Social Activities C. Educational enrichment activities D. Spiritual enrichment activities		_		student,				
C. Educational enrichment activities  D. Spiritual enrichment activities			*					
D. Spiritual enrichment activities					-			
					-			
E. Family activities		_			-			
		•			-			
F. Professional networking activities  G. Student recruitment			•		-			

3.	Would you be willing to attend at least one event per year?		_ Yes	No
4.	Are there any other factors which would affect yo  Time of day (Please state prefe Day of week (Please state prefe Financial Other	rence.)		
5.	Are you willing to pay annual dues of (\$15-\$20) to support the operational cost of the club?		_Yes	No
6.	Would you be interested in serving on a planning committee or being a club officer?		_Yes	No
7.	Would you be willing to:			
	Hostess a social event in your home? Serve on a telephone committee? Serve as an event chair?		- - -	
8.	If you have a particular expertise in your personal willing to share that with the club (i.e. speaking at leading a spiritual reflection, etc.)?  Please describe your area of expertise:	t a club ever		•
Please	e feel free to comment on your expectation for a loc	al club:		
Thank	x you for your input. Please return by	_ to:		
	Office of Alumnae Relations (or to le	ocal club pr	esident)	

H. None of the above

Office of Alumnae Relations (or to local club president)
110 Le Mans Hall
Saint Mary's College
Notre Dame, IN 46556