



Student Legislative Seminar  
Participant Information

Name \_\_\_\_\_ Age \_\_\_\_\_

Name of College \_\_\_\_\_

Area of Study \_\_\_\_\_

Why I chose to attend Community College \_\_\_\_\_

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Tell us your story \_\_\_\_\_

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These student stories will be added to a display at the conference and also a set of these students stories will be grouped by college and email to legislators from that student's district.