



# Randolph College

## Alumnae and Alumni Referral Form

**Randolph College** seeks to strengthen its pool of prospective students through R-MWC alumnae and Randolph alumni referrals. If you know of a student, whom you feel is a good fit for Randolph, please take a moment to complete this form and return it to the Office of Alumnae and Alumni.

Thank you for your continued support of the College.

### Alumna or Alumnus Information

Name: \_\_\_\_\_  
First                                  Maiden                                  Last                                  Class Year

Phone: \_\_\_\_\_  
Home                                  Cell                                  Email Address

Address: \_\_\_\_\_  
Street                                  City                                  ST                                  Zip                                  Country

### Student Information

Please circle one: Female / Male / Other

Name: \_\_\_\_\_  
First                                  Middle                                  Last                                  Preferred

Contact Information: \_\_\_\_\_  
Home Phone                                  Cell Phone                                  Email Address

Address: \_\_\_\_\_  
Street                                  City                                  ST                                  Zip                                  Country

High School: \_\_\_\_\_  
Name of H.S.                                  Address of H.S.

Academic and Extra Curricular Interests: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_

Please send this form by mail to the Office of Alumnae and Alumni Relations at  
2500 Rivermont Ave, Lynchburg, VA 24503 or by email at [shazlewood01@randolphcollege.edu](mailto:shazlewood01@randolphcollege.edu)