

Kalamazoo VALLEY Alumni+

CONTACT INFORMATION UPDATE

NAME: First _____
Middle _____
Last _____

Prior Name _____

Address _____

City _____ State _____ Zip _____ Country (if not US) _____

Phone Number _____

Alternate/Cell Phone _____

Email _____

Year of Graduation/Attendance _____

Program of Study _____

Transfer College _____

Employer _____

Job Title _____

Business Address _____

City _____ State _____ Zip _____ Country (if not US) _____

Is there any other information you would like to share with us?

Is there an image you would like to include with your update?

Electronic Submission: Complete form, click "Submit Form" to send to alumni@kvcc.edu
Hardcopy Form: Complete form and either fax to: 269.488.4220, or mail to: Kalamazoo Valley Community College
Alumni+, 6767 West O Avenue, PO Box 4070, Kalamazoo, MI 49003-4070

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