



Department of Geography
& Anthropology

New Student Information Form

Personal Information

Legal Name: _____
Last *First* *M.I.*

Preferred Name: _____ Pronouns (she/he/they): _____
(if applicable) (not required)

Address: _____
Street Address *Apartment/Unit #*

_____ *City* *State* *ZIP Code*

Cell Phone: _____ Email: _____

Birth Date: _____ LSU ID: **89-** _____

Advisor: _____

Were you hired as a Graduate Assistant? _____

If yes, have you ever worked on campus before? Where? _____

Academic Information

Principal Interests: _____

Field Experience: _____

Teaching Experience: _____

Emergency Contact Information

Full Name: _____
Last *First* *M.I.*

Address: _____
Street Address *Apartment/Unit #*

_____ *City* *State* *ZIP Code*

Primary Phone: _____ Alternate Phone: _____

Relationship: _____