Writing 100  (CRN 21180)  Tues. & Thurs.  (1:35 – 2:50)

Student Information Sheet

Name (Please Print) ________________________________    Date ___________2009
Student I.D. No. # ________________________________
Phone: Home ____________________ Work or Cell ________________________________
e-mail address:

Goals:

What is your academic goal for this year?
What is your academic goal for your college career?
What is your career goal?

This Course:

What grade do you hope to achieve for this course? ______
What grade do you realistically expect to get? ______

Reading:

Do you like to read?
What are your 2 all time favorite novels or short stories?
(Please list both titles and authors.) 1. ____________________________
2. ____________________________

The Writing Process:

Do you enjoy writing?  Circle one: Yes  No  Sometimes
What kinds of writing do you enjoy? _________________________________

What are one or two strengths you have as a writer?
1. ________________________________
2. ________________________________

What are one or two things you find difficult about writing?
1. ________________________________
2. ________________________________

Optional: Is there anything else you would like me to know to better assist you as your instructor?