### Department to Visit

<table>
<thead>
<tr>
<th>Action</th>
<th>Approval Signature</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Career Services</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Career Services Graduate Intake Form</td>
<td>Chrysoula Kourkounti</td>
<td>2/2/12</td>
</tr>
<tr>
<td>Fifteen Minute Appointment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Resume on File</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Office of Financial Aid</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Original Entrance Counseling Form</td>
<td>Michael Kirchmaier</td>
<td>2/2/12</td>
</tr>
<tr>
<td>Exit Interview Completed</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CPDS Completed</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Finance</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Balance Paid</td>
<td>Paul Hubbard</td>
<td>2/2/12</td>
</tr>
<tr>
<td>4 Academics</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Senior Survey</td>
<td>Nikki Stournaras</td>
<td>2/2/12</td>
</tr>
<tr>
<td>5 Library</td>
<td></td>
<td></td>
</tr>
<tr>
<td>All Materials Returned</td>
<td>V. Rev. Dr. Joachim Cotsonis</td>
<td>2/2/12</td>
</tr>
<tr>
<td>6 Registrar</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Final GPA received</td>
<td>Jay Ostrosky</td>
<td>2/2/12</td>
</tr>
<tr>
<td>This Completed Form Signed and Returned</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**DON’T FORGET...** The CONFIDENTIAL PERSONAL DATA SHEET (PG.2) must be completed BEFORE you visit any departments.
**PERSONAL DATA SHEET**

**I. Personal Data—Complete this section with information about yourself**

Name: (Last) ________________________________________ (First) _________________________________________ (MI) _____

E-mail Address: ___________________________________________ Date of Birth: ___/___/____

Permanent Mailing Address: __________________________ City: __________________ State: ____ Zipcode: ________

Maiden Name (If Applicable): ___________________________ Driver’s License (or State ID)#: ___________________ State: ____

Facebook Address: _________________________________________ Skype Address: ________________________________

Employer or Expected Employer: _____________________________

Employer’s Street Address: _________________________________ City: __________________ State: ____ Zipcode: ________

Employer’s Telephone Number: (___) __________ - __________

**II. Relatives’ Data – Enter all information for the 3 adult relatives specified. (If necessary, you must provide substitute references.**

<table>
<thead>
<tr>
<th>Relative</th>
<th>Street Address</th>
<th>Apt. #</th>
<th>City, State, Zipcode</th>
<th>Area Code and Telephone</th>
<th>E-Mail Address</th>
</tr>
</thead>
</table>
| Parent or Guardian | __________________________ | _____ | ___________________ | _____________________ | ___________________
| Maternal Grandmother | __________________________ | ____ | ___________________ | _____________________ | ___________________
| Paternal Grandmother | __________________________ | _____ | ___________________ | _____________________ | ___________________

**III. Other References (Family or Friends) – Enter all information for 3 more adult references at 3 different addresses.**

<table>
<thead>
<tr>
<th>Reference</th>
<th>Street Address</th>
<th>Apt. #</th>
<th>City, State, Zipcode</th>
<th>Area Code and Telephone</th>
<th>E-Mail Address</th>
</tr>
</thead>
</table>
| Adult Reference | __________________________ | _____ | ___________________ | _____________________ | ___________________
| Adult Reference | __________________________ | ____ | ___________________ | _____________________ | ___________________
| Adult Reference | __________________________ | _____ | ___________________ | _____________________ | ___________________

I hereby certify that all information provided on this form is complete and correct to the best of my knowledge.

Student’s Signature: __________________________________________ Date: __________________________
Hellenic College Holy Cross is a participant in the U.S. Department of Education, Federal Title IV program (Federal Student Aid) and therefore required to collect the information highlighted in gray for statistical purposes. This information will be kept confidential and used only for statistical purposes. We appreciate your cooperation in completing this survey.

1. Which one of the following best describes your primary status after graduation?

- Planning to continue education to obtain a higher degree
- Participating in a volunteer or service program (e.g. Peace Corps)
- Employed full-time (on average 30 hours or more per week)
- Seeking employment
- Employed part-time (on average less than 30 hours per week)

2. If you will be employed after graduation,

In which city and state is the job located?  
City: ____________________________________  
State: ________________

What is/will be your job title? ____________________________________

What is your annual wage for this position? ________________

Did you work for this company/organization prior to graduation?  YES  NO

What is your expected graduation date? ________________________

What is your GPA? ______________________

What is your current program of study? ________________________________________________________________________

What extra-curricular activities were/are you involved in? ________________________________________________________________________

Where would you like assistance?  
- Confirming my choice of career/major  
- Choosing or changing my career/major  
- Obtaining information about different careers/majors  
- Job market information  
- Other: (describe) ________________________________________________

How big a struggle or concern is this for you?  
No Concern  1---2---3 ---4---5---6---7---8---9 ---10  Significant Concern

What challenges/obstacles are you facing in your career planning?

- Academic  
- Too many interests  
- Self-esteem/Confidence  
- Pressure from Others  
- Mental Health (eg. Depression, emotional concerns)  
- Motivation  
- No Interest  
- Lack of career information  
- Indecisiveness  
- Other (List) ________________________________________________

What do you do for fun? _____________________________________________________________________________________

What skills or gifts do you believe you possess? ________________________________________________________________

If you could design your own job, what would it include? ______________________________________________________________

Select what is most important to your career:

- Money  
- Leadership Position  
- Interpersonal Relationships/Family  
- Job Security  
- Christian Environment  
- Benefits  
- Adventure  
- Time Commitment  
- Power

Who has influenced your career interests and why? ________________________________________________________________________

What steps have you taken before making this appointment? ______________________________________________________________

Student’s Signature: ____________________________________  Date: ______________________

---

CAREER SERVICES GRADUATE INTAKE FORM

---