



Vincennes University Project LINK Information Form

Classes are filled on a first come first served basis. Please return this form to the Project LINK office no later than July 1st.

School: _____ School Year: _____

Address: _____
Street Street City Zip Code

Phone: _____ Fax: _____

Guidance Counselor: _____ Phone/Ext _____
 E-Mail: _____

Technical Person: _____ Phone/Ext _____
 E-Mail: _____

Classroom Coordinator: _____ Phone/Ext _____
 E-Mail: _____

CRN	COURSE NUMBER	SECTION	TITLE	Cr. HRS	TIME	DAYS	ANTICIP ENROLL	Instructor
FALL SEMESTER								
SPRING SEMESTER								

Project LINK office information only:
 Class input into computer Registration forms sent Application form sent