

DEAR GRADUATING SENIOR:

Diocesan Campus Ministry of Ohio would appreciate the following information:

Name: _____

Present e-mail address: _____

Address: _____

City: _____ Zip: _____

Phone: _____ Parish: _____

High School: _____

Plans following graduation (Name of College/University you plan to attend • Employment

Thank You Very Much!

Return in late April to: Catholic Conference of Ohio
9 East Long Street, Suite 201
Columbus, OH 43215



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