

**West Sound Tech - Alumni Information**  
(formerly Kitsap Peninsula Vocational Skills Center)  
"Creating Quality Candidates for Tomorrow's Careers"

Today's Date: \_\_\_\_\_

Name: \_\_\_\_\_

Former Name (if different): \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: (home) \_\_\_\_\_ (cell) \_\_\_\_\_

Email Address: \_\_\_\_\_

Which school year(s) you attended WST: \_\_\_\_\_

Class/Program taken: \_\_\_\_\_

Have you worked in the field that you were trained for at WST?

Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, how long? \_\_\_\_\_

Current Position/Employer: \_\_\_\_\_

\_\_\_\_\_

Additional comments and/or information about yourself: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_