



Cadet Contact Information

Cadet's Name: _____

Please provide your primary contact information between now and Swearing-In Day:

Home Address: _____

Street

City

State

Zip Code

Home Phone Number: _____ Cellular Phone Number: _____

Other Phone Number: _____ E-Mail Address: _____

If you will be traveling between June 1, 2018 and Swearing-In Day, and not available at the contact information above, please provide your temporary contact information:

Dates for Temporary Contact Information: _____

Address: _____

Street

City

State

Zip Code

Phone Number: _____ E-Mail Address: _____

Dates for Temporary Contact Information: _____

Address: _____

Street

City

State

Zip Code

Phone Number: _____ E-Mail Address: _____

Please notify the Admissions Office immediately of any changes to your travel plans or contact information.

Return in White Envelope

Refer questions to: Chris McMunn at 860-701-6778 or Chris.A.McMunn@uscga.edu