

Student Information Sheet
Gov. 20: Foundations of Comparative Politics

Name and Class Year:

Telephone number:

Email address:

House affiliation:

(Expected) Concentration:

Other courses you are taking this semester (course name, not number):

Extracurricular activities:

Are there regions outside the US in which you have a special interest? If so, why?:

Is there anything else I should know about you? (Interests, concerns, special needs etc.):