



# MEMBER PROFILE

School \_\_\_\_\_

Grade \_\_\_\_\_

Name (Last, First) \_\_\_\_\_

E-mail Address \_\_\_\_\_

How did you hear about SWAT?

- Friend
- Teacher Sponsor
- Youth Coordinator
- School Announcement/ School Event
- Media (billboard, newsletter, internet, movie slides)
- Other (please name) \_\_\_\_\_

What are your skills?

There are so many ways a skill can be incorporated into tobacco prevention and education. We are interested in knowing about skills such as computer skills or fluency in a foreign language etc. AND we also want to know about your other skills/interests. For example, are you good at art? Juggling? Singing? Telling/making up jokes? Let us know- we want to help you use your skills in a way that you may not have used them before! 😊

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Are you currently employed? \_\_\_\_\_

How many hours a week do you work? \_\_\_\_\_

