



Consent for Contact Information and Mentor Acknowledgement

Student Name: _____

Address: _____

City/State/Zip: _____

Student Cell Phone: _____

School Email (if applicable): _____

Personal Email (not school): _____

By signing this document, I consent to Midland Institute for Entrepreneurship in association with my respective Creating Entrepreneurial Opportunities class to:

1. Use my email for registration of the personality profile survey
2. Communicate and collect class survey information
3. Deliver via email, mail, and cellphone, CEO related information

By signing this document, I also acknowledge that my student will be paired by my prospective Creating Entrepreneurial Opportunities class with a professional mentor.

Date: _____

Parent/Guardian Signature (if student is under 18):

Student Signature:
