



State of Connecticut

Office of Higher Education

Student Status Information Form

Branford Hall Career Institute

Student Information

Student Name: _____

Address: _____

Phone Number: _____ **Alternate Number:** _____

Email Address: _____ **Program:** _____

School Information

Start Date: _____ **Anticipated End Date:** _____

Program: _____

Clock Hours Completed: _____

Date expected to go out on externship: _____

Externship Information

Start Date: _____ **End Date:** _____

Organization Name: _____

Site Address: _____

Site Supervisor Name: _____

Phone Number: _____ **Fax Number:** _____

Email Address: _____ **Hours Completed:** _____

Office of Higher Education Contact Information

Phone number: 1-860-947-1816 Email Address: Help4Students@ctohe.org

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