

LIBERTY SCHOOL

Alumni, Teachers, Aides, Administrators, Trustees & Volunteers

Name: Last _____ Middle _____ First _____

Years attending or working at Liberty: From _____ To _____

What you did at Liberty: _____

Parent's names: Father _____ Mother _____

Parent's occupation: _____

What was your favorite celebration / event at Liberty (i.e. holiday program, plays, sport events, field trip) _____

Who was your favorite teacher: _____

Which teacher gave you the most encouragement: _____

Aside from teachers who made an impact on your time at Liberty: _____

Your best friends at Liberty: _____

Where did you go to high school: _____

What college did you attend: _____

Did you graduate: _____

What other degrees do you have: _____

What is your main occupation: _____

Were you ever in the military: _____

Where did you work in high school and college: _____

What was your first car: _____

Do you still live in the area: _____

Did your spouse go to Liberty School: _____

What year did you get married: _____

Your husband or wife's name: _____

Have your children gone to Liberty School: _____

Your children's names: _____

What are your best memories of Liberty School: _____

What is the one thing you would like for the people who open the Liberty Time Capsule 100 years from now to know about you: _____

*Only answer questions you feel comfortable with, Thank You