

Grizzly Digital

Graphic Design 1-2 Graphic Design 3-4

Photography 1-2 Photography 3-4

Period: 2

Name: Spencer Larsen

Birthday: 1 / 3
(month) (day)

Student ID#: _____

email address: _____



A little more about me:
Highly nostalgic individual

Check Classes you've had at MHHS

- Computer Graphic Design 1-2
- Computer Graphic Design 3-4
- Digital Photography 1-2
- Digital Photography 3-4
- General Computing (Microsoft)
- Other Classes (list) _____
- Computer Exploration

A Few of my favorite things...

Candy Bar: Babe Ruth

Cold Beverage: Grape Fruit Juice

Collectible: Pocket Knives

Dessert: Ice Cream Cake

Dinner Entree: Mashed Potatoe

Fast Food: Burgers

Flower: Corpse Flower

Fruit: Durian

Hot Beverage: Warm Water

Magazine: New Era

Movie: The Italian Job

Munchies: Cereal

Music: Queen

Way to Relax: Dunk on my 10 year old Brother

Vacation Location: Switzerland

Vegetable: Carrot

Cartoon: Spongebob

Supperhero/Power: Squirt acid out eyes and ears/Acid Man

Sport Basketball/Golf

Sports Team: Heat/Golf Team?

Video Gaming System PS4

Video Game NBA2K15

Software Expertise:

(Check 1-5. 5 is very proficient)

	1	2	3	4	5
Photoshop	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Illustrator	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
InDesign	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Acrobat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MS Word	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
MS PowerPoint	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
MS Excel	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Do you have a cell phone? Yes No

Does your phone have a camera? Yes No

Do you have a SmartPhone? Yes No
what's the number? (for class purposes only)

Do you have a computer at home?

Yes No

Do you have internet access at home?

Yes No

Do you have a website/blog?

Yes No

Write/type the url here:

larsenspencer.weebly.com