



Contact Information

Please print or type

Name _____
 Address _____
 City _____ State _____ Zip _____
 Home Phone _____ Cell Phone _____
 Email _____

Special Skills or Qualifications

Summarize special skills and/or leadership qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports.

Empty text box for special skills or qualifications.

Tell us how you would be an asset to the "Freshman FOCUS Leader" Program

Empty text box for asset to the program.

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, other misrepresentations made by me on this application, or future disciplinary actions may result in my immediate dismissal.

Name (printed)	
Signature	
Date	

Our Policy

It is the policy of this institution to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

Thank you for completing this application form and for your interest in volunteering with us.

Deadline: March 10th