



**Office of Student Life and Services
Student Volunteer Application**

Name: _____
Last First Middle

Student Identification Number: _____

Classification: Freshman Sophomore Junior Senior

Campus: Flagship Community College Law School

Cumulative GPA: _____ Major: _____

Email Address (UDC): _____

Email Address (Other): _____

Cell Phone: _____

Spring 2014 Meeting Availability (Please consider school and work availability):

Monday_____ Tuesday_____ Wednesday_____ Thursday_____ Friday_____

In which volunteer opportunity are you interested?

- Self-Study Process (Reaccreditation/ Reaffirmation)
- Strategic Planning Process Implementation Team
- Student Ambassador Program

Please return form to:

Kimberly Pennamon
Associate Vice President for Student Affairs
Student Life and Services
Building 38, Room A-10

Signature_____

Print Name

Date