

Living Well Student Application

Please attach résumé and cover letter

Please fill out the information below

___ Intern	Major:
___ Practicum # of credits:	Minor:
___ Volunteer # of hours:	Year in school:
Semester interested:	GPA:

Contact Information

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
E-Mail Address	
UFID	

Interests (select all that apply)

___ Administration	___ Events	___
___ Field work	___ Member Services	___
___ Fundraising	___ Fitness Assessments	___
___ Newsletter production	___ Web Design	___
___ Volunteer coordination	___ Marketing	___

Objective

What do you hope to gain by working at Living Well?

Special Skills or Qualifications

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

Previous Volunteer Experience

Summarize your previous volunteer experience.

Person to Notify in Case of Emergency

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
Relationship to you	

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, or other misrepresentations made by me on this application may result in my immediate dismissal.

Name (printed)	
Signature	
Date	