

UNIVERSITY CENTER PROGRAM COUNCIL



LEADERSHIP APPLICATION

Name _____ CID Number _____

Address (ASU) _____ Phone _____

(Home) _____ Phone _____

Classification _____ Major _____ Minor _____

GPA _____ Email address _____

What position are you applying for? _____

List previous committee experience (Dates, Responsibilities)

Number of course hours planned for the Fall Semester _____ Spring Semester _____

Other activities and/or jobs you will be involved in.

List any previous jobs or student activities experience which you feel would apply to this position (college or high school)

What goals would you like to achieve in the position you are applying for?

Please list 3 references [faculty, staff, or student(s) involved with UCPC]

Name	Phone or Email Address
1. _____	_____
2. _____	_____
3. _____	_____

I have read and understand the job description for this position and if accepted for this position, I agree to fulfill the responsibilities and duties required.

I authorized the appropriate staff to access my records to verify my GPA.

I understand that falsification of any of the information provided on this application may constitute the forfeiture of my application.

X _____