



The Women's Center  
484-365-7244  
1570 Baltimore Pike, MSC.48  
Lorraine Hansbery Hall, Basement Level  
Lincoln University, PA 19352

## Volunteer Application Form

### Personal Information:

Name: \_\_\_\_\_  
(First) (Middle) (Last)

Mailbox #: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Room Number & Residence Hall \_\_\_\_\_ Extension: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

### Emergency Contact Information:

Name: \_\_\_\_\_  
(First) (Middle) (Last)

Address: \_\_\_\_\_  
(Street and Number)

\_\_\_\_\_  
(City/State/Zip)

Telephone Number: \_\_\_\_\_ Relationship: \_\_\_\_\_

### Education Information:

Credits Earned to Date: \_\_\_\_\_ Cumulative G.P.A.: \_\_\_\_\_

Credits Currently Being Carried: \_\_\_\_\_ Expected G.P.A.: \_\_\_\_\_

Anticipated Date of Graduation: \_\_\_\_\_  
(Month and Year)

Major(s): \_\_\_\_\_ Minor(s): \_\_\_\_\_

### Time Commitments:

Please list all of your campus involvement/activities. Star (\*) those in which you have a leadership position and describe your role. Please continue on the back if you need additional space. Thank you.

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*You will receive confirmation e-mail when this request is approved.*