

Name:			Student Number:		
SFU E-mail:			Phone:		
Committee:					
Previous Club/DSU/External/Other Experience:					
What would you like to see this committee do?					
What would you like to see this committee do:					
Weekly Schedule (Please check off your available times)					
Monday	Tuesday	Wedneso	lay	Thursday	Friday
8:30-9:30	8:30-9:30	8:30-9	:30	8:30-9:30	8:30-9:30
9:30-10:30	9:30-10:30	9:30-10	0:30	9:30-10:30	9:30-10:30
10:30-11:30	10:30-11:30	10:30-	11:30	10:30-11:30	10:30-11:30
11:30-12:30	11:30-12:30	11:30-1	2:30	11:30-12:30	11:30-12:30
12:30-1:30	12:30-1:30	12:30-	1:30	12:30-1:30	12:30-1:30
1:30-2:30	1:30-2:30	1:30-2:	30	1:30-2:30	1:30-2:30
2:30-3:30	2:30-3:30	2:30-3	:30	2:30-3:30	2:30-3:30
Please read and sign the following statement:					
I, hereby declare that I am an undergrad student at SFU. I agree to adhere to the terms of reference of the committee to which I may be appointed.					
Two Peer References:					
Name:			Name:		
Phone:			Phone:		
E-Mail:			E-Mail:		
I would like to receive notifications about SFSS volunteer opportunities.					

Please return this form to <a href="mailto:admin.assistant@sfss.ca">admin.assistant@sfss.ca</a>. Interview times to be announced.