



ONE LIBERIA STUDENT LEAGUE
MEMBERSHIP APPLICATION FORM

APPLICANT INFORMATION

Name: _____

Sex: Male Female **Marital Status:** Married Single Divorced

Phone: _____ **Email:** _____

Address: _____

Occupation: _____

Current Institution / School: _____

Department: _____ **Id #:** _____

Major: _____ **Minor:** _____

Date of Birth: _____

County of Origin: _____

Nationality: _____

GENERAL INFORMATION

Have you been a member of any organization? Yes No

If yes, please list and indicate membership status:

_____ Current Past

_____ Current Past

_____ Current Past

Why do you want to be a member of the ONE Liberia Student League?

ESSAY APPLICATION

State in two (2) paragraphs some of your community service initiatives:

Briefly state some of your leadership history:

Briefly state your unification intent for Liberia:

CERTIFICATION

I, the undersigned, certify that (1) the information in this form is correct and complete, (2) That I will abide by all the rules and regulations governing this organization.

Applicant: _____ Date: _____

CONFIRMATION (Below for officers only)

Human Resources: _____ Date: _____

Director General: _____ Date: _____