



membership application

NAME OF APPLICANT _____ TCNJ ID # _____

PERMANENT ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

E-MAIL ADDRESS _____ HOME PHONE _____

CELL PHONE _____

LOCAL (CAMPUS) ADDRESS _____ CAMPUS EXTENSION _____

ANTICIPATED MAJOR (IF KNOWN) _____

ANTICIPATED YEAR OF GRADUATION _____

Community & High School activities and honors (attach on separate sheet)

College activities and honors (sophomore and transfer applicants only) (attach on separate sheet)

ESSAY QUESTION

Please attach your response to the essay question below. Your response should be typewritten and no more than one page long.

What qualities do you consider necessary for leadership? Which of these qualities do you possess and how are they exhibited in your social and academic interactions?

List below any other information you would like the selection committee to consider in evaluating your application:

I submit that the information above is accurate.

Student Signature

Date

**** Return this application to the W.I.L.L. Program via snail mail or email to: mlhopps@tcnj.edu
The College of New Jersey, PO Box 7718, Ewing, NJ 08628-0718**