

*Student Activists for
Service-Learning*



Member Application Form

Thank you for your interest in becoming a member of the Student Activists for Service-learning. Please return this application and reference form to your school advisor or: The School for Ethical Education at the address below or by fax to (203) 783-4461. We will contact you immediately to let you know we have received your application.

Date: _____

Student Name: _____ Grade: _____

Address: _____ City: _____ Zip: _____

Home Phone: _____ Cell: _____

Student Email: _____ Parent's Contact: _____

Additional Emergency contact: _____

School Name: _____

What experience do you have with service-learning or leadership?

Please provide a short paragraph about your strengths and how SASL will benefit with your membership:

Signature

Date