

Office of Admissions

Application for Student

	Personal Data	(please type or print neatly)		
Name:				
Campus Address:				Class Year: (please circle)
Campus Telephone:				First-year
Student ID Number:		pus E-mail:		Sophomore
Major:		or:		Junior
Hometown:		State:		
Telecounselors** (strengthtelephone contact)	udents look to build relationsl		-	
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	Please indicate the days and	times that vou will be available	to work	
Monday	Tuesday	Wednesday	Thursday	Friday
	Brief Personal Statements: F	lease attach vour responses on a	separate	
hy are you interested in	working for the Office of	Admissions?		
hat qualities will you bri	ng to the Office of Admis	ssions?		
riefly explain the most po v have they affected you?		ences you have had at Eli	zabethtown College.	
Signature. My si	gnature below indicates that all in	nformation in mv application is c	complete, factually	
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Notice of Nondiscriminatory Policy: Elizabethtown College continues its policy of nondiscrimination on the basis of sex in compliance with the Title IX of the Education Amendment of 1972 in all activities and programs under its sponsorship. In addition, the College administers all actions without regard to race, creed, color, national origin, age or handicap as defined by law. These policies apply to application selection as well as application for employment and all other personnel actions with the College. Flizabethtown College is accredited by the Middle States Association of Colleges and Schools and is approved by the