



# YAC - Yonkers Activities Council

## Student Leader Application

### Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_ *City State ZIP Code*

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Credits earned: \_\_\_\_\_ Major: \_\_\_\_\_ GPA: \_\_\_\_\_

### Reference

*Please list a faculty or staff reference and have them sign.*

Name: \_\_\_\_\_ Faculty/Staff: \_\_\_\_\_

Signature: \_\_\_\_\_ Phone/Email: \_\_\_\_\_

### Previous Involvement

Do you have any previous experience with clubs and or student activities? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Disclaimer and Signature

*I certify that my answers are true and complete to the best of my knowledge.*

*If this application leads to a position in the YAC, I understand that false or misleading information in my application may result in my release.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PLEASE RETURN TO THE FRONT DESK  
OR SEND TO: CROSSCOUNTY@SUNYWCC.EDU**