

EXTRACURRICULAR INFORMATION FORM

Name of Applicant:		
	ease list below, using additional paper if necessary your: Special awards and honors, with dates.	
2.	School and outside club memberships and activities, noting leadership positions and honors received, with dates.	
3.	Employment, both after school and in summer, with dates and hours per week.	
4.	Volunteer involvement, with dates and hours per week.	
5.	School athletics (note captain, varsity, letter, MVP, all-league, etc.), with dates.	
Co	ngressman Mike Thompson, 2300 County Center Drive, Suite A100, Santa Rosa CA 95403	

Phone (707) 542-7182 Fax (707) 542-2745

6. Out-of-school recreational activities, wi	tn dates.		
After you complete your list, give this form to your counselor for certification and sealing.			
To the counselor: Please certify the information above by signing below and place this completed form in a sealed envelope, signed across the flap, and return it to the applicant for inclusion in the complete application packet. Thank you.			
Name (signature)	Date		
Name (printed)			
Title	Telephone		