



# USAC STUDENT WELFARE COMMISSION

308 Westwood Plaza – Kerckhoff 308  
Los Angeles, CA 90024  
(310) 825-7586 | [usaswc@asucla.ucla.edu](mailto:usaswc@asucla.ucla.edu)



## USAC Student Welfare Commission STAFF APPLICATION 2011-2012

- **Priority Deadline for Applications: Friday, May 20, 2011 @ 5 PM.** Applications submitted by this deadline will be give priority consideration for committee chair positions.
- Staff applications will be accepted on a rolling basis.
- Please e-mail this completed application to [volunteerwithswc@gmail.com](mailto:volunteerwithswc@gmail.com).
- Interviews will be held at the discretion of the Committee Director(s).
- Available positions and descriptions may be found online at <http://www.swc.ucla.edu>.
- Question and concerns may be directed to [volunteerwithswc@gmail.com](mailto:volunteerwithswc@gmail.com).

### PART I – PERSONAL INFORMATION

#### PERSONAL INFORMATION

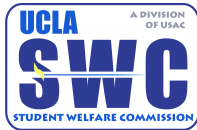
Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Major in School: \_\_\_\_\_ E-mail: \_\_\_\_\_  
 Current Address: \_\_\_\_\_  
 \_\_\_\_\_  
 Year in School: \_\_\_\_\_ Expected Graduation Date: \_\_\_\_\_

#### How did you hear about us? (Mark all that apply)

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Already on a Committee   | <input type="checkbox"/> Facebook                | <input type="checkbox"/> Total Wellness Magazine |
| <input type="checkbox"/> Enormous Activities Fair | <input type="checkbox"/> Friends                 | <input type="checkbox"/> E-Mail/Listserv: _____  |
| <input type="checkbox"/> SWC Staff Member         | <input type="checkbox"/> Friends of SWC Listserv | <input type="checkbox"/> Student Group: _____    |
| <input type="checkbox"/> Attended an SWC Event    | <input type="checkbox"/> Flier                   | <input type="checkbox"/> Other: _____            |

#### If you have attended an SWC Event, which events have you attended? (Mark all that apply)

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> BruinFest (Fall)       | <input type="checkbox"/> Mental Health Week (Winter) | <input type="checkbox"/> Super CPR (Spring)         |
| <input type="checkbox"/> World AIDS Day (Fall)  | <input type="checkbox"/> Yoga Under the Stars        | <input type="checkbox"/> Bruin Health Fair (Spring) |
| <input type="checkbox"/> Blood Drive (ongoing)  | <input type="checkbox"/> Chillax to the Max (Spring) | <input type="checkbox"/> Bruin 5k Run/Walk (Spring) |
| <input type="checkbox"/> CPR/FA Class (ongoing) | <input type="checkbox"/> RollAIDS (Spring)           | <input type="checkbox"/> Other(s): _____            |



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### **PART II- COMMITTEE SELECTIONS**

Please **rank** the Committees you are applying for **in order of preference** (if more than one) and list the staff positions you are interested in applying for within each committee. Rank 1 as your highest preference:

Rank	Committee Name	Staff Position(s) you are Interested In
	<b>Active Minds</b>	
	<b>AIDS Awareness</b>	
	<b>Blood Drive</b>	
	<b>Bruin 5k Run/Walk</b>	
	<b>CPR/FA</b>	
	<b>Environmental Awareness, Recycling, and Terrestrial Health (EARTH)</b>	
	<b>Gender Health</b>	
	<b>Global Health</b>	
	<b>Health, Nutrition, and Fitness (HNF)</b>	
	<b>Student Health Advocates (SHAs)</b>	
	<b>Total Wellness Magazine</b>	

Please select **ONE**:

I would like to join the staff of MULTIPLE committees.

I would like to join the staff of ONE committee.



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**PART III- SHORT ANSWER**

Please do not use more than the space provided.

**For New Staff Members: Please answer Questions 1, 2, 3 & 5**

**For Returning Staff Members: Please fill out the chart and answer Questions 2, 3, 4 & 5**

1. Why are you interested in joining the Student Welfare Commission? What are your goals for the commission and for yourself? What new ideas do you have for the upcoming year? (300 words max)

[Empty response box for Question 1]

2. Please list any special skills and experiences that might help you to fulfill the position(s) that you are applying for (e.g. organizational skills, artistic ability, public speaking, etc.). (300 words max)

[Empty response box for Question 2]



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3. What important health or student welfare issue should SWC focus on for the upcoming year? What do you see as an emerging or underrepresented health concern/topic? Give a concrete example on how you would address this issue. (250 words max)

Please list the SWC committee(s) you have been a part of and the staff position(s) you have held:

	Year (ex: 2010-2011)	Committee Name	Staff Position Held
1			
2			
3			
4			
5			

4. Describe your overall involvement in SWC. What events have you worked on and what was your role in planning them? What changes would you like to make for the upcoming year? (300 words max)

5. Please entertain us using this box (e.g.. fun fact, short story, doodle).



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### **PART IV- EXPECTATIONS AND APPLICANT AGREEMENT**

**Please check the boxes only after you have read and understood them.**

- I will be either a full or part-time student at UCLA for the entire school year.
- I am aware that SWC is comprised of multiple sub-committees, and I will give my full support to the other SWC committees at the discretion of the SWC Commissioner and the SWC Executive Board.
- I am aware that SWC is a division of the Undergraduate Students Association Council (USAC), and I will give my full support to the other USAC offices and commissions at the discretion of the SWC Commissioner and the SWC Executive Board.

**General Staff Requirements: Please check the boxes only after you have read and understood them.**

- I will attend at least **ONE** SWC General Meeting per quarter.
- I will flier for SWC for at least **ONE** hour per quarter.
- I will attend at least **ONE** SWC event per quarter. (Other than one hosted by my committee.)

#### **Additional Notes**

Please note that there will be Fall, Winter, and Spring Staff Retreats (date, time, and location are yet to be determined).

#### **Statement of Verification and Consent**

*I certify that the above information is true and correct. I agree to provide, if requested, any official documentation necessary to verify this information. I understand that a false statement or misrepresentation on this form may result in rejection of my application to the Student Welfare Commission. I also agree to allow this information to be released to all undergraduate students at the University of California, Los Angeles.*

**Applicant's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

Please e-mail this completed application and any questions you have to [volunteerwithswc@gmail.com](mailto:volunteerwithswc@gmail.com).

Thank you for your interest in the USAC Student Welfare Commission! You will be contacted by the Director of the committee(s) you are interested in regarding your application status. Interviews will be held at the discretion of the Director. Best of luck!