



# MOSAIC

## Membership Application Form

Full Name: \_\_\_\_\_ Preferred Name: \_\_\_\_\_

Ethnicity: \_\_\_\_\_ Date Applying: \_\_\_\_\_

Email Address: \_\_\_\_\_ ID #: \_\_\_\_\_

Hometown: \_\_\_\_\_ Dorm Bldg. & Room #: \_\_\_\_\_

Room Ext: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Parent/Guardian Name(s): \_\_\_\_\_

High school attended: \_\_\_\_\_

Other College(s) attended: \_\_\_\_\_

Class level this fall: FR SO JR SR

Home Church: \_\_\_\_\_ Pastor's Name: \_\_\_\_\_

List Diversity Topics of Interest to You: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Other Community Service/Activities: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Please return this form and the non-refundable registration fee (\$5.00) to:**

Union University – MOSAIC  
UU Box 1820  
c/o Jacqueline Taylor, MOSAIC Staff Advisor  
Assistant Dean of Students / Director of Career Services  
1050 Union University Drive  
Jackson, TN 38305