## APPLICATION FOR WORK ON THE FREEDOM VOTE

Name	AgeDirth Date	*Kace
	*Needec	for placement
Father's Name	Address	Phone
Mother's Name_	Address	Phone
Describe your present joi	b or status and program in scho	ool
School Address		
List the social, frater other organizations to wh	nal, political, collegiate, con hich you belong:	nmunity and
List briefly any special	skills (typing, photography, e	etc.)
	uld use during your stay in Mis	
I can arrange my own bai		Both
	ease find parental consent	
•	il rights activities you have p	
If you have ever been ar	rested, give place, date, char	ge and status of •ase.
If you have not worked i make some statement you work in Mississippi.	n Mississippi before, on a sere feel would help us decide whet	arate sheet pleas her you should
Signature	Date	
Return this application	at earliest possible date to:	Robert Weil FDP
All applications must be	e recieved by Oct. 11.	852 ½ Short St. Jackson, Miss.