

DLSU-D STUDENT PUBLICATIONS

Application for Membership

Publication: _____

Position Desired: _____

Name of Applicant: _____

Course/Yr/Sec: _____

Mobile No: _____

Email Address: _____

Webpage/Blog: _____

Talents/Skills: _____

Publication _____

Experience: _____

Present Affiliations: _____

Reason for wanting _____

to join _____

Signature/Date