HOPE COLLEGE "WALK TO WORK PROGRAM"
DECLARATION OF INTEREST

NAME: _____ **DATE:** _____

DEPARTMENT: _____ **POSITION:** _____

HOME ADDRESS: _____ **HOME PHONE #:** _____

_____

CURRENT RESIDENCE: Rent _____

or

Own _____ Mortgage Lender: _____

Mortgage Balance: _____

TARGET AREA HOME DESIRED: (if known)

PLANNED USE: Personal/family use only _____

Personal & rental unit(s) _____

OTHER REAL ESTATE OWNED: (If any, list with location)

RENOVATION/DECORATING PLAN: (check all that apply)

_____ I will do most of the work myself
_____ Have a contractor that I plan to use
_____ I want the College to arrange contracting
_____ Other: (explain)

I have read and agree to the conditions outlined in the Walk to Work Program Policy Statement dated March 22, 1995.

_____ _____
Employee Signature Date Signed

_____ _____
Human Resources Representative Date Signed

copy: Assistant to CFO/Hope College