

Please answer the following questions. (Please use additional paper for response.)

1. Why are you interested in serving on the Student Government Association?
2. What are your goals for SGA?
3. Please describe, in detail, skills you have, or classes you have taken, that would allow you to better represent your school.
4. Please list any campus or community activities that you are/have been involved in (including honors, awards and/or scholarships that you have received).
5. Have you previously been an officer or held a membership within SGA member or any other club or organization?
6. Do you wish to seek any officer positions within SGA should you be elected?
 President Vice-President Secretary Treasurer

What is your time availability? _____

Please attach a copy of your resume to application along with answer responses.

Student Government Association mission:

The Student Government Association serves to promote student interests, needs and welfare within the University community; to foster relationships between the learners, the faculty, and the administration; to ensure a positive campus environment; to provide for the expression of student opinion and interests to the community at large on issues affecting student life; to provide a unified voice for the Student Body; and to provide a physical and social environment in which to achieve the above objectives in accordance with the educational and cultural standards of the University.

Minimum requirements:

1. Must be enrolled for a minimum of 6 credit hours per semester during Fall and Spring semesters.
2. Must have and maintain at least a cumulative 2.5 GPA.

By signing below I acknowledge that I understand and accept the above mission and minimum requirements. I certify that the information on this application is accurate to the best of my knowledge. I understand that the information on this form will be made available to the IUE Staff and SGA members.

I hereby request that the Registrar's Office release my cumulative GPA and the number of credit hours that I am attempting this semester, when required by SGA. I understand that the Registrar may release the information at any time and that this release will remain in effect until I request, in writing, that it be cancelled, or when my appointed term has expired.

Applicant Signature: _____ Date: _____

Please return completed application to the dean of your school or to Campus Life (Springwood, Room 107) by Monday, April 6th at Noon.

For questions please contact Danielle Straszheim at (765)973-8480.