

## Division of Enrollment Management and Student Affairs Student Government Association

## **Application for Class Officers**

Date/	Semester Term □ Fall □ Spring Year								
General Information (Please complete all information)									
Name_	$\overline{e}$				Classification				
First M			Last						
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Major Minor			Minor						
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	Cumulative GPA			GPA_	* 4.2.5 CD4 :				
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Address									
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Permanent Address				P.U. Box Apt.					
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City	State	Zıp (	Tode		Phone:	( )			
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1 Tesiman	□ Junioi		CIIIOI						
Please select desired nosition									
□ King □ Queen									
Please select desired position.  □ President □ Vice President	This M. Last Classification  In ID Date of Birth / /  In ID Date of Bir								

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Campus Involvement							
(List any previous involvement in student organizations or campus activities.)							
Organization	Office (s) held	Year					
Organization	Office (s) held	Year					
Organization	Office (s) held	Year					
Organization	Office (s) held	Year					
Organization	Office (s) field	i cai					

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References (Please fill out information co	mpletely)							
Name Address					Phone			
Academic S	Schedule (Spring 200	7 Semo	ester)					
Course	Time	Date						
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Signature of Applicant:				Date				
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	Office Use Only:							