**STUDENT GOVERNMENT ASSOCIATION**

**COMMITTEE CHAIR APPLICATION**

Name Student Number

Address

Email

Phone

Classification \_\_\_\_\_\_Freshman \_\_\_\_\_\_Sophomore \_\_\_\_\_Junior \_\_\_\_\_Senior \_\_\_\_\_\_Graduate

Please select the committee you are interested in Chairing

\_\_\_\_Athletic Development \_\_\_\_Social Development

 \_\_\_\_Multicultural Affairs \_\_\_\_Safety & Improvements

\_\_\_\_Non-Traditional Students \_\_\_\_JIVE

\_\_\_\_Inter-presidents Council \_\_\_\_Public Relations

\_\_\_\_Web Communications \_\_\_\_Governmental Affairs

\_\_\_\_Elections

Indicate the best day and time for you to interview with us:

Monday Tuesday Wednesday Thursday Friday

9am 10am 11am 12pm 1pm 2pm 3pm

Signature: Date:

Please return application to the SGA Office, Student Center, Suite 214 by 5pm on **September 5, 2014.**