

Student Government Association Membership Application

Personal Information Last Name: First Name: MI: Mailing Address: City: State: Zip: Email Address: Cell: Home Telephone: Work: **Program Information** Expected Graduation Date: / / Start Date: Major: Select Degree Type below: Associate of Arts Bachelor of Arts Associate of Bachelor of **MBA** Science Science Community Service Information Volunteer Experience: What volunteer activities have you done? 3. 4. Organizations Affiliated with: What professional organizations are you a member of? 2. 3.

Areas of Interest: What would you like to do through SGA?

1.
1. 2. 3.
3.
4.
Skills and Talents: What contributions will you bring to the SGA through your unique skills and
talents?
$\frac{2}{3}$
4.

Personal Statement: Please tell us about yourself and why you have an interest in becoming a member of the Student Government Association.