

# Student Government Association Application Form

Today's Date: \_\_\_\_\_

Name: \_\_\_\_\_ Student #: \_\_\_\_\_

Address: \_\_\_\_\_

Home Ph #: \_\_\_\_\_ Beeper #: \_\_\_\_\_

Work Ph#: \_\_\_\_\_ Cell Ph#: \_\_\_\_\_

Email: \_\_\_\_\_

Program of Study: \_\_\_\_\_

Expected Graduation Date: \_\_\_\_\_

What Talents, skills or ideas do you want to bring to the Medical Campus SGA?

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Are you willing to participate in any student activities? Yes \_\_\_ No \_\_\_

All applicants must be currently enrolled in at least 6 credits at the Medical Campus & have a minimum GPA of 2.0.

President and Vice President must have a minimum GPA of 2.5. Please attach a copy of your degree audit and current class schedule.

**Submit application to Student Life/ SGA, Room 1171**