

# STUDENT COMMITTEE ON COMMITTEES

## CAMPUS-WIDE ADVISORY COMMITTEE APPLICATION

PLEASE LIST THE TOP 3 COMMITTEES YOU ARE INTERESTED IN AND CAPABLE OF SERVING ON. YOU MAY BE APPOINTED TO MORE THAN ONE COMMITTEE AT YOUR REQUEST OR THE FIRST AVAILABLE COMMITTEE OF THE 3 SELECTED.

COMMITTEE APPLYING FOR: 1. \_\_\_\_\_

COMMITTEE APPLYING FOR: 2. \_\_\_\_\_

COMMITTEE APPLYING FOR: 3. \_\_\_\_\_

HOW MANY HOURS ARE YOU WILLING TO COMMIT PER WEEK? \_\_\_\_\_

CIRCLE THE NUMBER OF COMMITTEES YOU ARE WILLING TO BE PLACED ON: 1 2 3

NAME: \_\_\_\_\_ YEAR: \_\_\_\_\_

COLLEGE: \_\_\_\_\_ BOX #: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

PUBLIC PHONE: ( ) \_\_\_\_\_ PRIVATE PHONE: ( ) \_\_\_\_\_

MAJOR: \_\_\_\_\_

CONTACTS, ORGANIZATIONS & TITLES: \_\_\_\_\_

LIVE:  ON CAMPUS  OFF CAMPUS GRAD YEAR: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

IF OFF CAMPUS - MAILING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PERMANENT MAILING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

I AGREE TO THE "TERMS OF APPOINTMENT" AND AUTHORIZE THE SCOC TO RELEASE ALL NECESSARY INFORMATION TO PARTIES IN CONNECTION WITH ANY COMMITTEES TO WHICH I MAY BE APPOINTED

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

ON SEPARATE SHEET OF PAPER IN 250 WORDS OR LESS, PLEASE EXPLAIN WHY YOU ARE INTERESTED IN THE COMMITTEES YOU ARE APPLYING FOR AND EXPLAIN WHAT CAMPUS ISSUES AND CONCERNS ARE IMPORTANT TO YOU. ADD ANY PRIOR EXPERIENCE, KNOWLEDGE, OR SKILLS YOU WOULD BRING TO EACH COMMITTEE.

CONTINUED ON REVERSE

## OPTIONAL INFORMATION

**GENDER:** \_\_\_\_\_ **ETHNICITY:** \_\_\_\_\_

**PLEASE RETURN THIS PAGE TO THE STUDENT UNION ASSEMBLY (SUA) OFFICE ON THE SECOND FLOOR OF THE STUDENT UNION. YOU CAN SIMPLY FOLD YOUR APPLICATION, WITH ESSAY, TAPE IT, AND DROP IT INTO A WHITE CAMPUS MAILBOX.**

**STUDENT COMMITTEE ON COMMITTEES  
1156 HIGH STREET  
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SANTA CRUZ CA, 95064**