Senate Finance Committee Member Application





Name:		Student ID*:		
Ad	dress:			
Cit	y:	Telephone #:	E-Mail:	@stcloudstate.edu
Major: N			Minor:	
Expected Graduation Date:			Is Your GPA above 2.0? Yes	No
Υοι	s notification is to inform you of Ur I must be in good standing with th Ve you had any violations at	e University regarding GPA and o	•	
higl		ded. This release is needed for co		maintained by SCSU and any other institution of release may or may not affect your acceptance
Sig	nature		Date:	
 What interests you in becoming a Senate Finance Committee Member? What qualities do you have that you feel will fulfill your requirements as a Senate Finance Committee Member? 				
3.	What efforts will you make to eliminate personal bias in your decision making?			
4.	What knowledge do you h	nave about Senate Finance	Committee?	

*Your Student ID is used to verify enrollment, GPA requirement, and for payroll purposes only.

Important: Applications are due by 5 PM on the first Wednesday of each month. Applications should be delivered to the Student Government Office, Atwood Memorial Center 139. All applicants are encouraged to attend the Student Government meeting on the first Thursday of the month at 5 PM in the Cascade room of the Atwood Memorial Center. At the meeting, applicants will be given an opportunity to explain why they believe they are a good candidate for this position and will receive questions from the Senate to further help them make their decision.

The Student Government of St. Cloud State University values diversity of all kinds, including, but not limited to race, religion, ethnicity, sexual orientation, gender, or age. Your application will be considered equally amongst all others submitted.