Student Alumni Gold Club
Application for Membership 2016
Dear Nominee,

Please type in your information and short responses and have three credible sources complete the recommendation forms which will electronically send to our email account. Recommenders may be any combination of alumni, professors, deans, staff, administrators, coaches, or a current SAGC member (only one student recommendation please). The deadline for the completed application (including the three recommendation forms) is due no later than 3:00pm on Monday, October 31, 2016 at Prakken 101 or studentalumnigoldclub@gmail.com. Failure to do so will result in a status of incompletion and you will no longer be considered for membership.

If you have any questions, comments, or concerns about Student Alumni Gold Club or the application process, feel free to contact me at (269) 816-1060 or rodewam@ferris.edu. You may also contact the Student Alumni Gold Club advisor, Kevin Bunce at (231) 598-2662 or at kevinbunce@ferris.edu.

Thank you for your interest in our organization, and I wish you the best of luck throughout the new member process!

Sincerely,

Meg Rodewald

Member Coordinator, Student Alumni Gold Club
Our Mission:

The Student Alumni Gold Club of Ferris State University will foster a connection between alumni and the University to create an environment in which both alumni and students can enrich their university experiences. We will provide leadership opportunities for students and promote activities that will build a deep loyalty and commitment to Ferris State University.

Conditions of Eligibility:

To be considered for membership into the Student Alumni Gold Club, a student must:

□ Have completed a minimum of one (1) semester at Ferris State University.

□ Have demonstrated strong leadership and involvement in extracurricular activities.

□ Complete and print the membership application, Including Resume, and

□ Submit 3 recommendations from any combination of alumni, professors, deans, staff, administrators, coaches, or a current SAGC member (preferably only 1 student recommendation).

□ Interview with a panel of SAGC Executive Board Members and Advisor.

□ Attend new member social on Tuesday, November 15th and informational meeting on Tuesday, November 22nd at 7pm.

Upon completion of the above requirements, membership into the Student Alumni Gold Club will be determined by a vote among the current SAGC members.

*Conditions of Eligibility are subject to exemption in special cases after review by the SAGC Executive Board.

*Incomplete or late applications will NOT be considered.
♦ PERSONAL INFORMATION

Full Name: __________________________________________________________
Preferred Name (For SAGC Nametag): __________________________________
Local Address: ______________________________________________________
Phone: ______________________ Email: ________________________________
Ferris State University Student ID Number: ____________________________

♦ ACADEMIC INFORMATION

Academic College: ____________________________________________________
Major: ______________________ Minor(s): ______________________________
Have you completed at least one semester at Ferris State University? Yes No
Are you currently a full time student (12 credits)? Yes No
Number of completed credit hours: ________ Cumulative GPA: ___________
Expected Graduation Month/Year: ________ Are you in Honors? Yes No

♦ T-SHIRT INFORMATION

T-Shirt Size: Adult’s S M L XL XXL

Dress Shirt Size: Men’s S M L XL XXL

Women’s S M L XL XXL
♦ CURRENT EMPLOYMENT

Please list any current on or off campus employment:

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<thead>
<tr>
<th>Employer</th>
<th>Hours Per Week</th>
<th>Duties</th>
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♦ CAMPUS INVOLVEMENT

Please list any involvement in extracurricular activities and any offices held.

**Freshman and sophomore applicants may include high school activities if necessary.

<table>
<thead>
<tr>
<th>Activity/Group</th>
<th>Dates Involved</th>
<th>Offices Held</th>
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♦ SHORT RESPONSES

Please answer the following five questions to the best of your ability.

1. Choose one activity from your list and briefly describe its most rewarding aspects.

2. Please describe the person who has influenced you the most and why.
3. What do you hope to gain through membership in the Student Alumni Gold Club?

4. Briefly explain why you chose Ferris State University.

5. If you were to describe yourself in one word, what would it be and why?

♦ APPLICANT SIGNATURE

I, ____________________________, Verify that the information provided for the Student Alumni Gold Club application is true. I understand that if at any point in the application process information is found to be false, I will be removed from consideration.

_________________________________________________________    ________________________________
Signature                                   Date

Please return your completed application to the Alumni Office located in Prakken 101 or to studentalumnigoldclub@gmail.com no later than 3:00pm on Monday, October 31st, 2016.