

CAMPUS RECREATION STUDENT ADVISORY BOARD APPLICATION

**Return by Tuesday, November 3, 2009 at 11 p.m. to the Rec Center Service Desk
or send as an attachment to Loretta.Capra@colostate.edu**

*Selection decisions are communicated via e-mail notification. You may be asked to attend a
Campus Recreation Advisory Board meeting to interview with the Board.*

(Please print or type)

Name: _____ Date: _____

Address: _____ Phone: _____

Year in School (next year): Fr Soph Jr Sr Grad Major: _____

E-mail address: _____

Gender: _____ Age: _____ Ethnicity (optional): _____

Status: Full-Time Student Part-Time Student

Check any of the following areas you are or have been involved with as a participant or employee:

ASCSU / Student Organizations Greek Life Residence Halls (work or live-in)

Apartment Life Diversity Offices Off-Campus/Non-Traditional

Campus Rec Center Employee (list Area) _____

Other activities (list organizations, committees, etc.):

PLEASE COMPLETE THE TWO QUESTIONS THAT FOLLOW

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Explain why you are interested in being a member of the Campus Recreation Student Advisory Board.

Do you use the Rec Center facility? Yes No

If Yes, describe the programs and services you use, and how often you use them.

If No, explain why not.