FERRIS STATE UNIVERSITY

STUDENT ALUMNI GOLD CLUB

Dear Nominee,

Please type in your information and short responses and have two credible sources complete the recommendation forms which will electronically send to our email account. Recommendations may be from 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 Friday, October 21. 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 **(517) 899-1798 or boveer@ferris.edu**. You may also contact the Student Alumni Gold Club advisor, **Ben Withey, at (231) 591-3835 or Benjaminwithey@ferris.edu**.

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

Sincerely,

Rebecca Bovee, New Member Coordinator, Student Alumni Gold Club

❖ PERSONAL INFORMATION

Full Name:							
Preferred Name (For SAGC Nametag):							
Local Address:							
Phone:	Em	ail:					
Ferris State University Stude							
,							
❖ ACADEMIC INFORM	ATION						
Academic College:							
Major:	Minc	or(s): _					
Have you completed at least one semester at Ferris State University? Yes No							
Are you currently a full time student (at least 12 credits)? Yes No							
Expected Graduation Month/Year: Are you in honors? Yes No							
❖ T-SHIRT INFORMATI	<u>ON</u>						
T-Shirt Size:	Adult's	S	М	L	XL	XXL	
				_	/·-	7.0.1=	
Dress Shirt Size:	Men's	S	M	L	XL	XXL	
Di 633 Jilli t 3126.	IVICII 3	3	IVI	L	ΛL	ANL	
	Women's	S	M	L	XL	XXL	

CURRENT EMPLOYMENT

Please list any current on or off campus employment:

Employer	Hours Per Week	Duties

CAMPUS INVOLVEMENT

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

**Freshman and Sophomore students may include high school activities if necessary.

Activity/Group	Dates Involved	Offices Held

❖ SHORT RESPONSES

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

Student Alumni Gold Club Application for Membership

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?

Student Alumni Gold Club	
Application for Membership)

**	APPL	ICANT	SIGNA	TURE
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I,, Verify that the in	formation provided for the Student
Alumni Gold Club application is true. I understand that	t at if any point in the application process
information is found to be false, I will be removed from	m consideration.
Signature	 Date

Please return your completed application via email to studentalumnigoldclub@gmail.com, or the Alumni Office located in Prakken 101.