

TO BE COMPLETED BY THE STUDENT:					
NAME					
LOCAL ADDRESS					
PHONE #					
SCHOOL	FR	SO	JR	SR	GRAD

LIST YOUR OUTSIDE ACTIVITES:

WHY WOULD YOU LIKE TO SERVE ON THE COMMITTEE TO DETERMINE ALLOCATIONS TO STUDENT ORGANIZATIONS?

You will need two recommendations from a campus employee of Southwestern to be considered for the committee. The person must know you well enough to complete the information below.

TO BE COMPLETED BY THE PERSON MAKING THE RECOMMENDATION

1. Students serving on this committee will make award decisions for funding student organization requests for student activity money. Please indicate whether this student would represent the student body effectively on this committee.

2. How long have you known the student and in what capacity?

3. Please indicate your evaluation of the student in the following areas:

	Low			High					
	1	2	3	4	5	NA			
a. Dependability									
b. Confidentiality									
c. Leadership									
d. Judgment									
e. Cooperativeness									
. Please add any additional	comments whic	h you would	like.						

(Signature of Person Making Recommendation)

4.

(Date)

Person making recommendation should return this application in a sealed envelope to the Dean of Students, 214 Stafford.