STUDENT GOVERNMENT ASSOCIATION
Homecoming Director Application
2021

***Past experience on the SGA Homecoming Committee is recommended, but not required. ***
** 45 Credit hour requirement to eligible**

Name: _________________________  MTSU Email: _______________________

Address: _________________________  Phone: _________________________

_______________________  Alternate Phone: _________________________

Classification (Fr., So., Jr., Sr.): _______  M#: ______________________
GPA: ______

Activities/Student Involvement:
________________________________________________________________________
________________________________________________________________________

Leadership Roles on Campus:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Will you be involved with these activities/organizations next year? If so, how much time will you devote to each of them?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Do you have a job? __________
If yes, is this full or part-time? ____________
If yes, are your hours flexible? Explain:
________________________________________________________________________
________________________________________________________________________
Have you been involved in Homecoming in the past? ________________

If yes, did you serve on a committee? ______ If yes, which one and what did you do?

______________________________________________________________________________

Give a brief description of Homecoming:

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

Why do you want to be the Director?

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

How well do work with the administration or faculty? Explain:

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

Explain any summer and/or fall commitments you may have:

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

Other Comments:

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

Include 2 references (one can be a peer or student organization leader):
1. Name, Email, Phone Number: ___________________________________________________

______________________________________________________________________________

2. Name, Email, Phone Number: __________________________________________________

______________________________________________________________________________

Please turn into the CSIL Office (SUB 330) by 4 p.m. on February 26th, 2021
Please sign up for an interview time upon submitting your application.
For questions, please call the CSIL Office: (615) 898-5812, or email: sga président@mtsu.edu