University Hearing Board Member Application

Student Representative 2017-2018

Name: ___________________________________________________________________________
(First) (Middle) (Last)

Student ID #: __________________ Expected Graduation Year: ________________ GPA: ____________

Major: _________________________________________ Minor (if applicable): __________________

E-Mail Address: _________________________________ Contact Number: ________________________

Mailing Address: ___________________________________________________

_______________________________________________________________________________

_______________________________________________________________________________

Have you previously been trained as a University Hearing Board Member? ☐ Yes ☐ No

If you selected “yes,” when did you serve? ______________________________

How did you hear about the University Hearing Board? _________________________________

Please list all co-curricular activities and/or employment in which you are involved (ex. internship, RSO).

_______________________________________________________________________________

_______________________________________________________________________________

Select all general hearing times in which you would be available to serve for the 2016-2017 academic year:

☐ Tuesdays 1:00 PM – 5:00 PM ☐ Thursdays 1:00 PM – 5:00 PM
☐ Wednesday 9:00 AM – 1:00 PM ☐ Wednesday 1:00 PM – 5:00 PM
☐ Fridays 9:00 AM – 1:00 PM ☐ Fridays 1:00 PM – 5:00 PM

If selected, University Hearing Board members are required to participate in training during the beginning of the Fall 2017 semester. Training dates are scheduled for Friday, September 8th (12 PM – 5 PM), Friday, September 15th and September 22nd (1PM – 5PM).

☐ I understand this requirement and have no conflicts.
☐ I will have a conflict in training on these dates.

Please explain conflict:

Student
Please answer the following questions on a separate sheet of paper.
Please limit your responses to a maximum of three-pages (typed and double-spaced).
Do not forget to include your name and Spire ID number on all your materials.

1. Why are you interested in serving as a University Hearing Board member? What do you hope to gain from the experience?

2. What qualities do you possess that would help you in being an effective member of the Hearing Board?

3. What role does the University Hearing Board play in setting and upholding community standards?

4. What do you perceive to be the strengths and potential weaknesses of the current process of resolving alleged violations of the Code of Student Conduct?

I hereby authorize the Dean of Students Office to confirm my academic and conduct records for the purpose of checking my eligibility to serve as a University Hearing Board Member. Additionally, I certify that I meet the minimum eligibility requirements to be a Board member.

__________________________________________    ___________________
(Signature)        (Date)

Priority Application deadline is April 14, 2017.
Applications should be submitted to the Dean of Students Office.