

# Edwards Campus Student Advisory Board

## Membership Application

Name \_\_\_\_\_

Academic Program \_\_\_\_\_ Level Jr. Sr. Grad. **(Circle One)**

Mailing Address \_\_\_\_\_

\_\_\_\_\_

E-mail Address \_\_\_\_\_

Phone Number \_\_\_\_\_

Employer \_\_\_\_\_ (Full Time) (Part Time)

**Please complete the following questions. Two to three sentences per question is sufficient.**

1. What made you decide to attend KU Edwards Campus?

2. What is your favorite aspect of attending the University of Kansas in Overland Park?

3. In your opinion, what could be done to improve the KU Edwards Campus?

Please sign and date this form, address it to Mary Ryan, associate dean, and drop it off at the KU Edwards Campus reception desk. You will be contacted by a student advisory member about upcoming meetings.

Thank You!

Signature \_\_\_\_\_ Date \_\_\_\_\_

All members will work in unison to accomplish the goals set forth to benefit the students of the KU Edwards Campus. All members are expected to maintain records of meetings and other activities that will provide resource information for future members.