

PDS Advisory Council Student Representative Application

Please type or print neatly.

Name _____ Email Address _____ Local Phone Number _____

Local Street Address _____ City _____ State _____ Zip Code _____

Complete, if applicable:

Alternate Phone Number _____ Street Address _____ City _____ State _____ Zip _____

Please answer the following questions in complete, thorough responses. Attach an additional sheet of paper, if necessary.

What experiences/insight can you provide to the PDS Advisory Council?

Why would you like to serve as the student representative on the PDS Advisory Council?

Applicants must submit this completed application, letter of interest, resume, current transcript (or documentation from the Degree Works program reflecting completed coursework and grades), and a letter of recommendation. The PDS Advisory Council will interview the most qualified candidates.