

THOMAS UNIVERSITY HONOR COUNCIL - *Application for Council Membership*

Name: _____

Email Address: _____ Phone : _____

Status: ___ Junior ___ Sophomore ___ Freshman GPA: _____ (must be over 2.5)

Number of Semesters on Campus: _____ (must be more than 1) # of Credits Planned for Spring 04: _____

Honor Council membership may entail 1-3 hours of time per week away from your other endeavors and academic studies. Are you willing to make this commitment? Please initial your acknowledgement here. _____

Please list the e-mail addresses of 4 people (2 of which must be Thomas University faculty) who will provide us with a brief personal reference. Please sign below indicating that you waive your right to review these reference letters or e-mails

1. Name: _____ E-mail: _____ Relationship: _____

2. Name: _____ E-mail: _____ Relationship: _____

3. Name: _____ E-mail: _____ Relationship: _____

4. Name: _____ E-mail: _____ Relationship: _____

I waive my rights to review all letters and e-mails regarding my suitability to serve on the Thomas University Honor Council: _____

(Please Sign Here)

Please review the poster information regarding the Honor Council officers. Please indicate any preference you might have (if any) for any of the positions listed below by checking next to them:

President: *Student advocate, Council liaison, non-voting member* (1 position available): _____

Vice-President: *Directs education activities, voting member* (1) _____

Recorder: *Responsible for documentation of Council activities, voting member* (1) _____

Regular Members: *Voting members* (3) _____

Alternate Members: *Non-voting and does not attend hearings unless assigned* (2) _____

Essay: Please attach a concise statement that addresses the following questions:

- What is the need and importance of a student run Honor Council on the Thomas University campus?
- Why do you desire to be a member?
- What benefits and talents do you believe you bring to the Council?
- How do you see confidentiality as a part of the Honor Council process?
- Do you have any previous experiences that would serve you in this role?
- Is there any other information that you would like the Selection Committee to know?

*A personal interview will be completed as part of the selection process at the beginning of next semester. This form must be returned via e-mail or hard copy to Bill Milford – Room 6 – Modular Building by **December 17, 2004**. You can e-mail Bill with any questions at bmilford@thomasu.edu*