

College of Health and Human Services Advocates Board Application

New Application Renewal Application

Name (Last, First, Middle)		Address (Street, City, State, County, Zip)	
Home Telephone	Employer	Employer's Address	
Business Telephone	Occupation	Preferred Mailing Address <input type="checkbox"/> Home <input type="checkbox"/> Business	E-mail
EDUCATION			
Type	Name and City of School	Year Graduated	Degree
High School			
College			
Other			
Other			
EMPLOYMENT HISTORY			
Name, City & State of Employer <small>(Start with most recent employment; list last 10 years only)</small>		Dates	Position Held
Community Affilliations (past or present)			
Why are you interested in serving as a member of the College of Health and Human Services Advocates Board?			
I wish to apply for membership on the Advocates Board.			
Signature		Date	
For Board Use Only			
Recommended for Appointment By	<input type="checkbox"/> New Term <input type="checkbox"/> Fill Unexpired Term of		
Application <input type="checkbox"/> Approved <input type="checkbox"/> Rejected <input type="checkbox"/> No Action	Term Begins	Term Expires	

Please return completed form to:
 Linda Petrosino, Ph.D., Dean
 Bowling Green State University
 College of Health and Human Services
 100 Health Center
 Bowling Green OH 43403