Luther College Student Senate
First-Year Class Representative Application

1. Applicant Information

First Name ____________________________  Last Name ____________________________
Residence Hall ___________________  Room Number __________  SPO Number __________
Cell Phone ____________________________  E-mail Address ____________________________

2. Please tell us why you are interested in this position and why your fellow residents should vote for you.


3. What previous leadership experience do you have and/or what qualities can you bring to the position?


4. What do you hope to accomplish as a member of Student Senate?


Signature: ____________________________  Date: __________________

Paper applications must be returned to the Student Life Office, Dahl Centennial Union 266 (upstairs), by 5:00pm on Monday, Sept. 7th.