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| Tau Rho Beta society  National Officer Application |  |



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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Applicant Information | | | | | | | | | | | | | | | | | | | | | | | |
| Last Name | | |  | | | | | | | | First |  | | | | | | | M.I. | | Date | |  |
| Street Address | | | |  | | | | | | | | | | | | | | | Apartment/Unit # | | | |  |
| City |  | | | | | | | | | | State |  | | | | | | | ZIP |  | | | |
| Phone |  | | | | | | | | | | E-mail Address | | |  | | | | | | | | | |
| Position Applied for | | | | | |  | | | | | | | | | | | | | | | | | |
| Are you a graduate of an college or university? | | | | | | | | | YES | NO | | If no, when is your graduation date? | | | | | | | | | |  | |
| What chapter are you a member of? | | | | | | | | |  | | | When? | | | |  | | | | | | | |
| Have you ever been convicted of a felony? | | | | | | | | | YES | NO | | If yes, explain | | | |  | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | |
| Education | | | | | | | | | | | | | | | | | | | | | | | |
| High School | | |  | | | | | | | Address | |  | | | | | | | | | | | |
| From | |  | | | To | |  | Did you graduate? | | YES | | NO | | | Degree | | |  | | | | | |
| College | |  | | | | | | | | Address | |  | | | | | | | | | | | |
| From | |  | | | To | |  | Did you graduate? | | YES | | NO | | | Degree | | |  | | | | | |
| Other | |  | | | | | | | | Address | |  | | | | | | | | | | | |
| From | |  | | | To | |  | Did you graduate? | | YES | | NO | | | Degree | | |  | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | |
| References | | | | | | | | | | | | | | | | | | | | | | | |
| Please list three professional references. | | | | | | | | | | | | | | | | | | | | | | | |
| Full Name | | |  | | | | | | | | | | Relationship | | | | |  | | | | | |
| Company | | |  | | | | | | | | | | Phone | | | |  | | | | | | |
| Address | | |  | | | | | | | | | | | | | | | | | | | | |
| Full Name | | |  | | | | | | | | | | Relationship | | | | |  | | | | | |
| Company | | |  | | | | | | | | | | Phone | | | |  | | | | | | |
| Address | | |  | | | | | | | | | | | | | | | | | | | | |
| Full Name | | |  | | | | | | | | | | Relationship | | | | |  | | | | | |
| Company | | |  | | | | | | | | | | Phone | | | |  | | | | | | |
| Address | | |  | | | | | | | | | | | | | | | | | | | | |

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| Why do you feel you are qualified for this position? | | | |
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| Disclaimer and Signature | | | |
| I certify that my answers are true and complete to the best of my knowledge.  If this application leads to employment, I understand that false or misleading information in my application or interview  may result in my release.  Please submit by e-mail to LWicksTPB@yahoo.com | | | |
| Signature |  | Date |  |