

ALPHA GAMMA SIGMA HONOR SOCIETY

Committee Application

Fall 2010

Full Name _____

Phone # _____

E-mail Address _____

Which Committee would you like to be part of _____

- | | |
|--|--|
| <input type="checkbox"/> Internal (Blast/Sink-a-Scholar) | <input type="checkbox"/> Fundraising |
| <input type="checkbox"/> External (TV Tapping) | <input type="checkbox"/> Flea Market |
| <input type="checkbox"/> Activities | <input type="checkbox"/> Publicity Art |
| <input type="checkbox"/> Recording | |

Why do you want to be a part of this committee?

Are you interested in helping run the committee? (Ex. Recording Committee Secretary) ___Y___N

Optional: Which other committee would you like to be a part? (In case there are no spots available, your application will be forwarded to your second choice.)

What is your availability? : Please mark "X" in the box of the day/time you are available.

Time	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
10:00-11:00AM						
11:00-12:00PM						
12:00-1:00PM						
1:00-2:00PM						
2:00-3:00PM						
3:00-4:00PM						
4:00-5:00PM						
5:00-6:00PM						

Please complete this application and turn this into your committee leader, or enclosed this in envelope and deposit it in the AGS mailbox, located in the Student Affairs Office (CCbuilding).

