



Application for Coordinating Board Student Representative

Name: [Click here to enter text.](#)

Institution: [Click here to enter text.](#)

Graduation Date: [Click here to enter a date.](#)

Major(s): [Click here to enter text.](#)

GPA: [Click here to enter text.](#)

Mailing Address: [Click here to enter text.](#)

Phone Number: [Click here to enter text.](#)

E-mail: [Click here to enter text.](#)

Please describe an issue related to higher education that you are most interested in and why.
Limit to 150 words*.

[Click here to enter text.](#)

Please explain how you would help your fellow college students by serving.
Limit to 150 words*.

[Click here to enter text.](#)