

St. Thomas University

# Campus Activities Board

## APPLICATION PACKET



Est. 2014

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## **Check List**

Please have all of the items listed below in the order that they appear on this list when submitting your application for the Campus Activities Board (CAB).

- Campus Activities Board Mission Statement Acknowledgement
- Application Forms
- Agreement Statement

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**Campus Activities Board Mission Statement**

The mission of the Campus Activities Board henceforth known as CAB, is to enrich the campus life experience by encouraging the involvement of all students with entertainment that is engaging and enjoyable. CAB functions to enrich the cultural and social needs on campus. The Campus Activities Board provides interesting, exciting, and diverse experiences to entertain the students. This is achieved through the production and implementation of a variety of activities and programs. The Campus Activities Board shall encourage the development of leadership skills through organizing, facilitating, and participating in activities and programs. CAB also supports and collaborates with the Student Government Association including; clubs/organizations, and intramurals. CAB strives to unify the campus, instill a sense of bobcat pride, and inspire students to become an active part of the community. CAB is open to all students who are committed to upholding this mission and have a desire to contribute to the enrichment of student life at St. Thomas University.

*Please sign and date below that you have read and acknowledged the mission statement above.*

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**Sign**

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**Date**

**Application Forms**

Instructions: Print clearly in black or blue ink. Answer all questions. Sign and date the form.

**PERSONAL INFORMATION:**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

STU ID # \_\_\_\_\_ Phone Number \_\_\_\_\_

Shirt Size \_\_\_\_\_ Birthday (M/D) \_\_\_\_\_

**Are you current?**

*Check which category that applies to you down below.*

Undergraduate   
Graduate

STU email address \_\_\_\_\_

Major/s \_\_\_\_\_

Minor/s \_\_\_\_\_

*Please check the box below;*

I acknowledge that I must have a cumulative grade point average (GPA) that is the school's minimum general academic acceptance in each semester in order to continue participating in St. Thomas University's Campus Activities Board. So this organization may confirm my academic standing is acceptable, I authorize any current University Administrator or his/her designee to retrieve my grade point average (GPA) during each semester for the duration of my involvement as a Campus Activities Board member.

What is your expected graduation date (*if applicable*) \_\_\_\_\_  
*Example: Spring 2020*

**Do you have student employment?**

Yes \_\_\_\_\_ No \_\_\_\_\_

*If yes, please list where including the days and times?*

**Do you live on campus?**

Yes \_\_\_\_\_ No \_\_\_\_\_

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**Have you ever been on probation for any reason with the school?**

Yes \_\_\_\_\_ No \_\_\_\_\_

**Do you work off campus?**

Yes \_\_\_\_\_ No \_\_\_\_\_

*If yes, what are your days/hours available?*

Monday \_\_\_\_\_ Tuesday \_\_\_\_\_ Wednesday \_\_\_\_\_

Friday \_\_\_\_\_ Saturday \_\_\_\_\_ Sunday \_\_\_\_\_

Hours Available: from \_\_\_\_\_ to \_\_\_\_\_ Thursday \_\_\_\_\_

Please attach a copy of your current class schedule.

Have you ever joined a club/organization at St. Thomas University?

Yes \_\_\_\_\_ No \_\_\_\_\_

*If yes, please list the name of the Club/Organization*

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**Have you ever been an officer in any Club/Organization at STU?**

**Yes:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Duties:** \_\_\_\_\_

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**Agreement Statement**

I certify that the information contained in this application is true and complete. I understand that false information may be grounds for denial or immediate removal of members of the Campus Activities Board at any point in the future if I am accepted. I acknowledge that for one semester designated by the Associate Director of Student Life I will be on a mandatory probationary period. My performance and conduct during that semester will determine if I will officially be eligible to become a part of St. Thomas University's Campus Activities Board. During this time there will be a voting process by the Associate Director of Student Life and all of the current Campus Activities Board members. I also acknowledge that being a part of Campus Activities Board is voluntarily only and I will not receive any financial compensation from St. Thomas University.

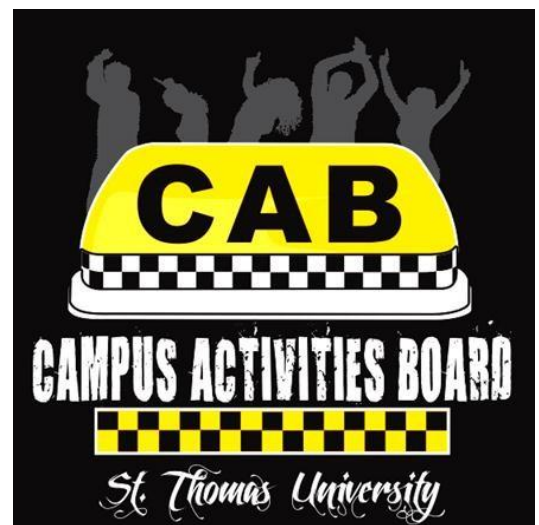
I authorize the verification of any or all information listed above.

<b>Signature:</b> _____ <b>Date:</b> _____
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**Contact Information**

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If you have any questions or concerns please contact the Associate Director of Student Life - John Jackson at [jjackson3@stu.edu](mailto:jjackson3@stu.edu) or (305) 474-6932



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