



Alumni Advisory Council Membership Application

Thank you for your interest in serving on the Alumni Advisory Council (AAC). Please complete and return this application and a copy of your resume to alumni@lindenwood.edu.

Basic Information:

Full name: _____
Preferred first name: _____
Pronouns: _____
DOB (MM/DD/YYYY): ____/____/_____
Home Address: _____
City: _____ State: _____ Zip Code: _____
Home Phone: _____ Cell Phone: _____
Personal Email: _____

Education Information:

Degree 1:
Institution Name: _____
Graduation Year: _____
Major: _____
Type (i.e. BA, BS, MA, Ed.D, PhD): _____
Academic School (i.e. School of Sciences): _____

Degree 2:
Institution Name: _____
Graduation Year: _____
Major: _____
Type (i.e. BA, BS, MA, Ed.D, PhD): _____
Academic School (i.e. School of Sciences): _____

Degree 3:
Institution Name: _____
Graduation Year: _____
Major: _____
Type (i.e. BA, BS, MA, Ed.D, PhD): _____
Academic School (i.e. School of Sciences): _____

This is a FILLABLE DOCUMENT. Complete this form on your computer and email it to alumni@lindenwood.edu. If you prefer, you can email and fill it out by hand. ALL RESPONSES ARE CONFIDENTIAL. Submit printed applications to:

Advancement & Communications
Lindenwood University, 209 South Kingshighway, St. Charles, MO 63301



Degree 4:

Institution Name: _____

Graduation Year: _____

Major: _____

Type (i.e. BA, BS, MA, Ed.D, PhD): _____

Academic School (i.e. School of Sciences): _____

Degree 5:

Institution Name: _____

Graduation Year: _____

Major: _____

Type (i.e. BA, BS, MA, Ed.D, PhD): _____

Academic School (i.e. School of Sciences): _____

Business Information:

Employer: _____

Title: _____

Business Address: _____

City: _____ State: _____ Zip Code: _____

Business Phone: _____ Business Email: _____

Other:

Where do you prefer to receive correspondence? Home Business

T-Shirt size (Unisex): S M L XL 2XL 3XL

Committee Rankings:

Please rank from 1 – 4 which committee you would be interested in serving on, 1 being the most interested, 4 being the least interested. The Office of Alumni Relations will strive to match you with your top choices but cannot guarantee it. If you need more information about the committees, please visit the website.

- **Programs & Events:** _____
- **Communities:** _____
- **Pride:** _____
- **Support:** _____

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LINDENWOOD
UNIVERSITY

Favorite Lindenwood memory:

Short bio of yourself for the website (250 words):

Why are you interested in serving on the Lindenwood Alumni Advisory Council?

Have you served on other organization boards? If so, please provide the organization name, dates of participation, and if you held a leadership position on that board.

Describe any other volunteer work you have done with Lindenwood, the community, and other charitable organizations.

Identify the talents or skills you could contribute to the council.

Do you know any other Lindenwood alumni? If so, who? Do you think they would like to get more involved?

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