



**Student Government Association  
Hialeah Campus**



Membership Application

Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Student Email: \_\_\_\_\_ Pathway: \_\_\_\_\_

Current GPA: \_\_\_\_\_ Number of Credits at Hialeah Campus: \_\_\_\_\_

1. What skills, talents and ideas can you contribute to the Hialeah Campus SGA?

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2. Have you or are you now, participating in any student organization or club? If yes, please explain:

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3. Would you be interested in being involved in any committees? If so, what are your areas of interest?

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For Office Use Only

Term: \_\_\_\_\_ Approval Date: \_\_\_\_\_ Welcome Email sent: \_\_\_\_\_ Initial: \_\_\_\_\_