**APPLICATION FOR PRESIDENT’S EMISSARIES**



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| **NAME:** |  |
| **STUDENT ID:** |  |
| **UD ADDRESS:** |  |
| **PHONE NUMBER:** |  |
| **E-MAIL ADDRESS:** |  |
| **EXPECTED GRADUATION (e.g., MAY 2025):** |  |
| **MAJOR:** |  |

**Please list all student activities in which you are currently involved:**

**Why do you want to become a President’s Emissary?**

**(Include any additional comments on a separate sheet of paper.)**

**PLEASE INCLUDE AT LEAST ONE LETTER OF RECOMMENDATION. THE LETTER NEEDS TO BE FROM A CURRENT FACULTY OR STAFF MEMBER. THE LETTER SHOULD INCLUDE THE NAME, ADDRESS, AND PHONE NUMBER OF THE INDIVIDUAL PROVIDING THE RECOMMENDATION. BY SUBMITTING THIS APPLICATION, YOU CONSENT TO THE OFFICE OF THE PRESIDENT CONDUCTING AN ACADEMIC AND CHARACTER REVIEW TO ASSESS YOUR CANDIDACY, AND REVIEWING RECORDS RELEVANT TO THAT ASSESSMENT.**

**PLEASE INCLUDE YOUR RÉSUMÉ WITH YOUR APPLICATION.**

**APPLICATIONS ARE DUE NO LATER THAN MONDAY, FEBRUARY 5, 2024. PLEASE EMAIL TO** [**tweckesser2@udayton.edu**](mailto:tweckesser2@udayton.edu) **OR DROP OFF AT:**

**Office of the President**

**St. Mary’s Hall, Room 207**

**CAMPUS +1624**