

Rockhurst University Leadership Transcript Entry and Validation Form

Please print all information.

Name (as it appears on college records): _____

I.D.#: _____

Permanent Address: _____

City: _____ State: _____ Zip: _____

Campus Phone#: _____ Expected Graduation Year: _____

Directions

Please fill in the table below according to the following guidelines

1. **Academic Year** – Enter the leadership positions held from March 1, 2003 – March 1, 2004
 2. **Type of Leadership Activity** – There are two categories of student involvements for this transcript. Only one category can be selected per organization/event/experience.
 - (A) Athletics – Team Captain only
 - (L) Leadership - Includes leadership positions in an officially recognized student organization, committees and department-sponsored groups. (SAB, Black Student Union, Fraternity/Sorority, Student Alumni Association, Student Ambassadors, Orientation, Homecoming Committee)
 - (P) Paraprofessional Work Experience – Includes on campus work experience where formal training is given (RA, Learning Center SI)
- **One Point will be awarded for each leadership and paraprofessional experience listed. ****
3. **Name of Organization/committee/Event/Experience** – Give the official name or title of the organization or activity.
 4. **Position Held** – In one word, list the position you held (Secretary, President, Social Chair, Orientation Leader or Coordinator, etc).
 5. **Moderator**– these signatures is to verify that you are currently, or have held the position listed, or have served on the committee listed.
 6. **Your Signature** – You need to read and sign the statement below the table to authenticate this form. Unsigned forms will not be processed.

Col. 1	2	3	4	5
Date position was held: Month/Year – Month/Year	Type of Activity	Name of Organization/Committee/Event/ Experience	Position Held	Moderator
April 2003 – April 2004	L	Student Senate	President	

**Additional lines on back

I certify by my signature that I have been honest and truthful to the best of my ability concerning all the information I have submitted in this form.

Signed: _____ Date: _____

