

This form can be completed on a computer and emailed to Sara Keck at skeck@hlg.edu.

RESIDENT

ADVISOR

APPLICATION

Office of
Student Development
Hannibal-LaGrange University

Applications Due

January 31, 2012

Check List:

- Turn in RA Application and Folio 180 resume to the Student Development Office

Important dates to remember:

- **01/31/2012** – Application due in the SDO by 4 p.m.
- **02/06/2012 – 02/10/2012** – RA interviews
- **05/03/2012 - 05/05/2012** – RA training
- **08/13/2012 – 08/22/2012** - RA training

For more information please contact your Residence Hall Director.

Resident Advisor Application

Name: _____ Student ID# _____ Date: _____

Current College

Classification: _____ Overall GPA: _____ Box # _____ Phone #: _____

Current On-Campus Assignment:

Building: _____ Apt: _____ Room: _____

Note: By submitting this application I give the Student Development Office permission to verify my GPA.

Building Placement Preference: We would appreciate your input in building placement, however, the residence life staff reserves the right to place each RA selected where they believe that person is best suited to serve. For our information, please list your first three building preferences and state your reason(s) for believing you would be best suited for that building.

1st:

2nd:

3rd:

“Consecrate yourselves,
for tomorrow the
Lord will do
AMAZING things
among you!”
Joshua 3:5

Would you be willing to
move to a different dorm?

Yes No

Would you be willing to have an all
freshman wing?

Yes No

I am interested in being a summer RA.

Yes No

I am interested in being a part of
Reslife staff leadership.

Yes No

1. Please share what you have learned in your experience as an RA?

2. What are some areas that you were challenged in and how will you use this experience to improve as an RA?

3. Why do you desire to continue being an RA?

4. Do you regularly attend a local church? _____ Which one? _____

5. What was the best part of training? What was the worst part of training?

6. What can we do to improve the total RA experience?

The information contained in this application is accurate and factual to the best of my knowledge. I realize that intentional falsification of statements on this application will subject me to disqualification as an applicant, and/or dismissal as a RA.

Signature: _____ Date: _____

Please return this application to the Student Development Office by **4 pm on January 31, 2012.**
