

STUDENT HEALTH ADVISORY BOARD APPLICATION

Academic Year 2011-2012

What is the Student Health Advisory Board?

The Student Health Advisory Board (SHAB) is an advisory body to Student Health Service (SHS). Since SHS is funded by student fees, SHAB works to ensure the satisfaction and quality of health care at Marquette University. The primary initiatives of SHAB are to:

1. Provide a student voice in Student Health Service's operations;
2. Promote a positive and open channel of communication between the Student Health Service staff and the student body;
3. Contribute additional awareness of student issues to the administration of Student Health Service;
4. Promote awareness of services available through Student Health Service that ensure personal and academic success.

Student Health Advisory Board responsibilities:

- Represent the needs, opinions, and ideas of particular groups within the University.
- Evaluate proposed budgets of Student Health Service and recommend an annual budget to the Director of Student Health Service.
- Recommend changes in services offered by Student Health Service, based on the best interest of the student body.
- Serve as liaison between the student body and Student Health Service.
- Actively participate in the publicity and marketing of Student Health Service.
- Assist in survey research of Student Health Service.

Student Health Advisory Board members must:

- Be a current Marquette or MIAD student, in good academic standing
- Be able to serve as a member for one full academic year
- Be able to attend and participate in SHAB meetings and activities:
 - SHAB meetings will occur on the first and third Tuesday of the month from 6:00pm – 7:00pm

Please return your completed application to the Center for Health Education & Promotion by 4:30pm on Wednesday, September 14th.



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STUDENT HEALTH ADVISORY BOARD APPLICATION

Academic Year 2011-2012

NAME: _____

CAMPUS ADDRESS: _____

PHONE: _____ EMAIL: _____

POSITION APPLYING FOR:

AT-LARGE STUDENT ORG. REP STUDENT ORG. NAME _____

YEAR IN SCHOOL (2011-2012 academic year):

FRESHMAN SOPHOMORE JUNIOR SENIOR GRADUATE

MAJOR/MINOR(S): _____

CUMULATIVE GPA: _____ ANTICIPATED GRAD. DATE: _____

Please respond to the following questions on a separate sheet and attach to the application.

1. Why do you want to be a member of the Student Health Advisory Board (SHAB)?
2. What qualities would you bring that would benefit SHAB?
3. What do you hope to gain from your experience as a SHAB member?
4. As a SHAB member, what issues concerning Student Health Service do you think should be worked on for 2011-2012 school year?
5. Please list your other time commitments (i.e.: organizational involvement, committee work, part-time jobs, internships) for the fall of 2011 and spring of 2012.

I, _____, understand what is expected of me as a Student Health Advisory Board Member. I attest that all of the information in this application is accurate and true.

Signature of Applicant: _____ Date: _____



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