



January 25, 2017

Dear Student Trustee Applicant:

Thank you for your interest in applying to serve as a student trustee on the Shawnee State University Board of Trustees. The term open for Student Trustees is a two-year term (2017-2019).

Included in this packet is information about the SSU Student Trustee Appointment Process, an Ohio Boards and Commissioners Questionnaire and an Authorization and Waiver form. All applications must include your student identification number. Only complete applications will be considered.

Applicants must have a GPA of no less than a 3.0, be in good academic, social and financial standing with the University, and be involved in campus, community or other service-oriented activities. Applicants meeting eligibility, academic, and social requirements will be interviewed by the President who will recommend applicants to the Governor. Final appointments will be made by the Governor.

Please make sure that your application includes all of the required information including a résumé or biography, a short essay as to why you want to be considered for the position, the Authorization and Waiver form and an Ohio Boards and Commissioners Questionnaire. Applications without all of these materials will be considered incomplete.

All application materials must be returned to the Office of the President or the Office of the Vice President for Enrollment Management & Student Affairs by Tuesday, February 28, 2017.

I look forward to receiving your application for this important role on the University's Board of Trustees.

Sincerely,

A handwritten signature in blue ink that reads 'Rick S. Kurtz'.

Rick S. Kurtz  
President

Office of the President

[www.shawnee.edu](http://www.shawnee.edu)

740.351.3208 • 740.351.3470 fax

940 Second Street • Portsmouth, Ohio 45662-4344

# Shawnee State University Board of Trustees

## Student Trustee Appointment Process

Each University must have a process for identifying candidates for consideration for appointment as Student Trustees on the Shawnee State University Board of Trustees. This document was developed in consultation with Student Government leadership and describes that process.

Currently enrolled SSU students in good standing are invited to apply for the position of Student Trustee on the Shawnee State University Board of Trustees.

### Role of Student Trustees

Membership of the Shawnee State University Board of Trustees includes two student trustees who are appointed by the Governor upon recommendation by the University. The responsibilities of members of the Shawnee State University Board of Trustees include:

1. To learn how Shawnee State University functions-its uniqueness, strengths, and needs;
2. To prepare for, regularly attend, and actively participate in the Board meetings and committee assignments;
3. To be willing to support the Board and work with fellow Board members in a spirit of cooperation; and
4. To work as a member of the Board to formulate policies for the University and avoid participating in administration of that policy unless specifically authorized to do so by the Board.

Student Trustees serve for two fiscal years. Current enrollment and good academic, social and financial standing are required for appointment.

The Board of Trustees meets six times a year, every other month, beginning in July of each fiscal year. Meetings are normally held in the afternoon on the second Friday of the month. Related committee meetings are normally held on the mornings of the Board meetings. A Student Trustee will be assigned to serve on one of the Board committees which are the Academic and Student Affairs Committee and the Finance and Administration Committee. Trustees are expected to attend meetings of the Board and a New Trustee Orientation.

Student Trustees should organize their class schedules in a way that enables them to fully participate in Board meetings.

During the academic year, Student Trustees may have the opportunity to attend a statewide meeting of Student Trustees.

## Application Process

To ensure full consideration for appointment as a student trustee, applicants should

- Secure and complete the application packet which may be downloaded here:
- <http://www.shawnee.edu/leadership/board-of-trustees/student-trustees.aspx>
- Applications must be typed.
- Complete the “Boards and Commissions Questionnaire.”
- Prepare a résumé or biography.
- Write a short essay about why the applicant should be considered for the position.
- Sign a waiver permitting the University to ascertain that the applicant is in good academic, social and financial standing with the University and report these findings to the Governor’s Office of Boards and Commissions.
- Submit complete materials to the Office of the President. Only complete applications will be considered.

The applications of individuals recommended by the President will be forwarded to the Governor’s Office of Board and Commissions along with academic and social standing information. Notification of appointment will come from the Governor’s Office.

**Authorization and Waiver for  
Shawnee State University Board of Trustees  
Student Trustee Applicant  
2017-2019**

Name: \_\_\_\_\_

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

The term for which you are applying is for 2017-2019 (two years).

As an applicant for the position of student trustee on the Shawnee State University Board of Trustees, I hereby certify that I am in good academic, social and financial standing and that I am not on any form of academic or disciplinary probation as a student at Shawnee State University. Under the Family Educational Rights and Privacy Act, I waive my rights to privacy and give permission to the University to verify my GPA, academic rank, and social and financial standing and report such findings to the Governor's Boards and Commissions Office.

If selected to serve as the student trustee on the Shawnee State University Board of Trustees, I will do my best to fulfill the duties and obligations of this position to the best of my ability for the duration of my appointed term.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Complete and Return to:  
Boards and Commissions  
77 South High Street  
30<sup>th</sup> Floor  
Columbus, OH 43215  
Phone: (614) 466-3555  
Fax: (614) 466-9354



**JOHN R. KASICH  
GOVERNOR  
STATE OF OHIO**

The State of Ohio is an equal opportunity employer and will not use any of the information you provide to discriminate against you on the basis of race, color, religion, sex, national origin, handicap, age, or ancestry. If you need more space to answer any question or explain any of your answers, please use additional sheets. This information MUST BE COMPLETED IN FULL. Answer "none" or "not applicable" where appropriate.

**IN ADDITION TO THIS FORM, PLEASE SEND A RESUME OR SHORT  
BIOGRAPHY TO THE ABOVE ADDRESS OR EMAIL TO  
[BOARDS.COMMISSIONS@GOVERNOR.OHIO.GOV](mailto:BOARDS.COMMISSIONS@GOVERNOR.OHIO.GOV)**

Full Name: \_\_\_\_\_

Residence Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

County of Residence: \_\_\_\_\_ Length of Residence in Ohio: \_\_\_\_\_

Phone Numbers (Home): \_\_\_\_\_ (Cell): \_\_\_\_\_ (Business): \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Current Business / Employer: \_\_\_\_\_

Business Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

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NOTE: The Ohio Revised Code sets forth demographic qualifications for service upon many boards and commissions. You must provide only that demographic information required for service upon the board or commission to which you seek appointment. If you are unsure of whether demographic qualifications exist for a specific board or commission, please contact the Governor's Boards and Commission staff at 614-466-3555

Sex: Male:  Female:  Date of Birth: \_\_\_\_\_

Race:

White: All persons having origins in any of the original peoples of Europe, North Africa or the Middle East.

Black or African American: All persons having origins in any of the Black racial groups of Africa.

Hispanic or Latino: All persons of Mexican, Puerto Rican, Cuban, Central or South America or other Spanish culture or origin, regardless of race.

Asian: All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent (for example, China, India, Japan, and Korea).

Native Hawaiian or Pacific Islander: All persons having origins in any of the original peoples of the Hawaiian Islands and Pacific Islands (for example, Hawaii, Philippine Islands, and Samoa).

American Indian or Alaskan Native: All persons having origins in any of the original peoples of North America and who maintain cultural identification through tribal affiliation or community recognition.

Other: Please self define: \_\_\_\_\_

Are you registered to vote in Ohio? Yes:  No:  County of Registration: \_\_\_\_\_

Party-Affiliation: Republican:  Democrat:  Unaffiliated:  Other: \_\_\_\_\_

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Please specify the board or commission that interests you:

Do you currently serve on a gubernatorial board or commission? If yes, please identify:

Are you seeking reappointment? Yes  No

Have you ever been a member of the armed forces of the United States, its reserve components or the National Guard? If yes, please state branch, service period, and last rank, and please indicate if you did not receive an honorable discharge, were ever court-martialed, were ever assessed non-judicial punishment, resigned in lieu of court-martial, or were administratively discharged:

Are you now under any charge or charges for any crime? If yes, please identify:

Have you ever, as an adult, been charged with any crime or arrested for any crime (regardless of whether you were convicted or acquitted) excluding minor traffic offenses? If yes, please identify:

Has any civil litigation or garnishment action ever been filed against you? If yes, please identify:

Has any civil protection order (CPO) or restraining order or emergency custody order relating to domestic violence or any other subject ever been entered against you? If yes, please identify:

Have you ever had any civil, administrative, or arbitration judgment or garnishment entered against you or against any business in which you were owner or the majority shareholder? If yes, please identify:

Have you ever filed personal bankruptcy or been adjudicated bankrupt? If yes, please provide details:

Are you currently in arrears on any court-ordered child support payments? If yes, please identify:

Has any business that you have owned, or of which you have been the majority shareholder, ever filed for bankruptcy or been adjudicated bankrupt? If yes, please identify:

Have you ever failed to pay any government-insured debt or any debt owed to a government entity? If yes, please identify:

Have you ever applied for, or held a license for a business, trade, or profession that required proof of good character or examination? If yes, please identify the license and issuing authority:

Have you ever been denied such a license, had that license revoked or suspended, or been disciplined with respect to that license?

Have you ever been disciplined for, or has any action ever been taken against you by any public or licensing authority or professional organization for any breach of ethics or unprofessional conduct or failure to make required disclosures? If yes, please identify:

Are all of your federal, state and local taxes current? If no, please explain:

Within the past three years, has any business venture for which you were an owner or person responsible for remitting withholding taxes of sales taxes, failed to pay such taxes in a timely manner? If yes, please explain:

Have you ever received, other than as an employee, or has any business that you owned or of which you were the majority shareholder, ever received any income from the Ohio state board or commission to which you seek appointment? If yes, please identify the income:

Have you ever received income as a lobbyist or "legislative agent: as defined in the Ohio Revised Code section 101.70 or "executive agency lobbyist" as defined in Ohio Rev. Code section 121.60 for work related to the Ohio General Assembly, any Ohio elected officer or any agency or entity of the executive branch of the Ohio state government? If yes, please identify the entity receiving the income:

Are you a United States Citizen? If no, please state immigration status:



Do either you or your spouse own or are either you or your spouse the majority shareholder of any business that will derive income from the Ohio state board or commission to which you seek appointment? If yes, please identify the business and the amount of annual income anticipated:

Do you have, or have you had, any personal, financial or business interest or dealings that might present a conflict of interest with your proposed state appointment? If yes, please identify:

Identify and describe any other information or situation that others might perceive as a conflict of interest with your proposed state appointment, or which might cause embarrassment to the state should you be appointed to a state board or commission:

Have you been publicly identified with a particularly controversial national, state, or local issue, or with an issue under the supervision of the board or commission to which you seek appointment? If yes, please explain:

**EDUCATION/TRAINING** (Use separate sheet of paper if necessary)

High School Name:	Location (City, State):	Did you graduate? [ ] Yes [ ] No
Check Year Completed: [ ] 9 [ ] 10 [ ] 11 [ ] 12		Obtained GED? [ ] Yes [ ] No

School Name (College/University):	Location (City, State):
Did you graduate? [ ] Yes [ ] No      Check Year Completed: [ ] 1 [ ] 2 [ ] 3 [ ] 4 [ ] 5 [ ] 6	Major:

School Name (College/University):	Location (City, State):
Did you graduate? [ ] Yes [ ] No      Check Year Completed: [ ] 1 [ ] 2 [ ] 3 [ ] 4 [ ] 5 [ ] 6	Major:

School Name (College/University):	Location (City, State):
Did you graduate? [ ] Yes [ ] No      Check Year Completed: [ ] 1 [ ] 2 [ ] 3 [ ] 4 [ ] 5 [ ] 6	Major:

PLEASE LIST RELEVANT WORK EXPERIENCE:

1.

2.

3.

I, \_\_\_\_\_, certify that all of the answers and statements on this form are true, complete and correct to the best of my knowledge and recollection and are made in good faith.

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Signature of Applicant

I, \_\_\_\_\_, state that I understand that any information provided to the Governor's office may be a "public record" under Ohio law. I hereby waive any right to privacy of any information I have provided herein, and I authorize the Governor's office to investigate any of my responses.

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Signature of Applicant

Complete and  
Return to:  
Boards and  
Commissions  
77 South High Street  
30<sup>th</sup> Floor  
Columbus, OH 43215  
Phone: (614) 466-3555  
Fax: (614) 644-0951