

**OFFICE OF STUDENT HOUSING & RESIDENTIAL LIFE
RESIDENT ASSISTANT
APPLICATION 2020-2021 ACADEMIC YEAR**

Application Deadline: May 1st, at 6:30 pm email lodges@siskiyous.edu
Recommendations Deadline: On or Before, May 15th at 6:30pm Emailed by **Recommender ONLY.**

Electronic copies of the recommendation forms(pages 6-8) are available on the school website for download.

Please complete this form entirely, submit Application and Recommendation forms by email: lodges@siskiyous.edu. Please fill out all portions of the application. **If a question is not applicable please indicate the section with a N/A. Any incomplete attachments or applications will not be processed. Any applications received after the APPLICATION DEADLINE will not be considered. DO NOT TURN IN YOUR APPLICATION TO LODGE STAFF OR OFFICE.**

I. Personal Information:

First Name	Last Name
Permanent Home Address	City, State, Zip Code
Permanent Home Address (Line 2 if needed)	Home Phone Number
Cell Phone Number	<input type="checkbox"/> YES <input type="checkbox"/> NO Can you receive Text?
College of the Siskiyous Student Email	Primary Email Address
	Current Building / Room Number (If living in lodges)

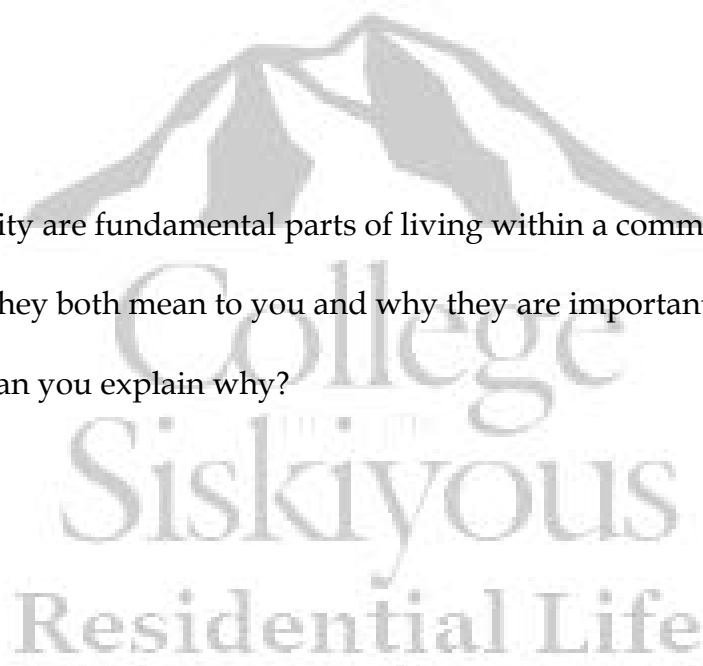
II. Academic Information:

First Semester at COS (Fall 2020, Spring 2020 etc.)	<input type="checkbox"/> YES <input type="checkbox"/> NO Transferred to COS	If marked YES, which institution(s)
Current Major/Field of Study	Objective at COS (Check all that apply) <input type="checkbox"/> Transfer <input type="checkbox"/> Certificate Program <input type="checkbox"/> A.A. Degree	
Units Planned for Enrollment Fall 2020 Semester	Total Units Currently Completed	Expected Graduation Date
Last Semester GPA	Cumulative GPA	

III. Questions

Please answer each of the following questions.

1. What interests you about being a Resident Assistant and what are the strengths you would bring to the position?
2. Diversity and equality are fundamental parts of living within a community. Can you please elaborate on what they both mean to you and why they are important? If they are not important to you, can you explain why?
3. How would you build relationships with students as a Resident Assistant, and what would be the nature of those relationships?



4. Describe a time when you were a successful leader during a stressful time.

5. How will this position fit in with your lifestyle, goals and college schedule?



6. Why are you applying for the Resident Assistant Position?

College
Siskiyou
Residential Life

IV. References and Recommender List

1. **Applicant Fill this portion in:**

Please list your two (2) references. One **MUST** be a COS faculty or professional staff/administration member. The second may be a person you know (advisor, supervisor, employer, high school teacher, etc.) that is **NOT a personal friend, family member or relative.**

2. **Please have them fill out the recommendation form attached to the application**

2.1. *Name* _____

Relationship to applicant: _____ COS Employee: YES NO

2.2. *Name* _____

Relationship to applicant: _____ COS Employee: YES NO

(Back up reference in case other references are unable to assist you. TWO references are mandatory and will be counted. If a third recommendation forms submitted, it will be discarded without being opened or read.)

3rd Back up Reference Name _____

Relationship to applicant: _____ COS Employee: YES NO

V. Work Experience : Paid and Volunteer

Resumes will NOT be accepted in lieu of this form.

Employer Name & Supervisor Name and Contact Info	Dates of Employment Start Date - End Date	Duties: Please list duties and tasks responsible for

VI. Extracurricular Information

Will you be involved in any clubs, sports, or jobs while you are at COS this next year? If so, please list.

Lodge Government Representative

If you are not granted the position of Resident Assistant, would you be interested in serving the community in the capacity as a Lodge Government Representative (LGR)? (Please mark only ONE)

YES, I am interested NO, I am not interested

I. Signature

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By signing this form I, _____, verify that all of the information provided above is correct and
Full Name
factual to the best of my knowledge. I understand that if this application is not completely filled out or submitted by
the deadline mentioned above I will **NOT** be considered as a Resident Assistant Candidate for the Academic year of
2020-2021.

Signature: _____ Date: _____

STAFF FILL IN ONLY: Received Date: _____ Complete: YES NO Staff Initial: _____