## Future Professionals Committee Member Application Please submit completed applications to Committee Advisor at: office@mnsha.org

Name:	Email address:
School/University:	Program/Major:
Current Educational Level:	
What memberships are your currentl  ☐ MNSHA ☐ NSSLHA ☐ local University NSSLHA chap	
If yes, please briefly describe your in	volvement:
Briefly describe any leadership expe	rience you have had:
What is one strength, skill, or quality	you feel you would contribute to the committee?
What is one personal goal you have involvement in this committee?	or one area you are hoping to improve upon through
What about this committee interests	you?
Please share any additional relevant during the decision-making process:	information you would like the committee to consider
commit to the following requirements -maintain committee membership for -participate in committee conference -act as a liason to share information	or one year (August-July)

Signature:

page, recording/sending meeting minutes, etc.)