

Student Entertainment Board Committee Sign-Up

Name: _____

Year in School: _____

Major: _____

Phone Number: _____

E-mail: _____

How did you hear about SEB?

Why do you want to join the SEB Street Team?

Have you been on the SEB Street Team in the past? If yes, what experience do you have?

Do you have experience with event planning? Please provide examples.

Please rank in order what committees you want to work with – 1 being your first choice and 6 being your last choice. Please tell us your reasoning for the ranking of each committee (Let us know if the reasoning is because of a class conflict).

_____ **Up All Night:** Tuesday, 3-4 pm (CUB LL38)

_____ **Spotlight:** Wednesday, 6-7 pm (CUB LL39)

_____ **Concerts:** Wednesday, 4-5 pm (CUB LL38)

_____ **Special Events:** Monday, 5-6 pm (CUB LL39)

_____ **Films:** Tuesday, 7-8 pm (CUB LL38)

_____ **Lectures:** Tuesday, 5:30-6:30 pm (CUB LL39)

*We cannot guarantee you will get your first committee choice.

Is there anything else you would like to share with us?

