

SOUTHERN ILLINOIS UNIVERSITY
EDWARDSVILLE

UNIVERSITY HOUSING

Horizons Application



Participation in the Horizons Living Learning Community is voluntary and applicants will be reviewed on a first-come, first-serve basis.

Please complete this application and mail it back to the address below by May 31, 2008.

Name: _____ University ID#: _____
Email: _____ Birth Date: _____
Address: _____
Home Phone with Area Code: _____ Desired Roommate: _____

Why are you interested in joining Horizons?

What do you want to gain from the Horizons experience?

Describe some of your previous leadership experiences? (Feel free to attach a resume)

What types of programs would you like to see available to you? Please check all that apply:

<input type="checkbox"/> Social	<input type="checkbox"/> Intramural Sports	<input type="checkbox"/> Leadership Opportunities
<input type="checkbox"/> Academic Achievement	<input type="checkbox"/> Personal Wellness	<input type="checkbox"/> Athletic Events
<input type="checkbox"/> Community Service	<input type="checkbox"/> Health Related Topics	<input type="checkbox"/> Cultural/Diversity

Please return completed application to:

University Housing
c/o Lisa Israel
Campus Box 1258
Edwardsville, IL 62026-1258