

**RESIDENT ADVISOR APPLICATION
RIDER UNIVERSITY**

PLEASE PRINT OR TYPE ALL RESPONSES

Return all forms to the Residence Life Office, Student Affairs Suite 1st Floor

RIDER UNIVERSITY IS AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER.

Name _____ Preferred Name _____

Bronc ID Number _____

Campus Address: Hall _____ Room _____ Phone _____

Permanent Address _____ Phone _____

Have you ever been found responsible of a disciplinary violation? If yes, please explain: _____

ACADEMIC BACKGROUND

Academic Major _____ Class Status (please circle): FR SO JR SR

Expected Graduation Date _____ Fall Term GPA _____ Cumulative GPA _____

Are you a transfer? _____ If yes, from where _____ GPA _____

RESIDENCE HALL EXPERIENCE

Residence Halls lived in:	Lifestyles (single-sex, co-ed, theme):	Dates:
_____	_____	_____
_____	_____	_____
_____	_____	_____

Residence Hall Government positions held:	Residence Hall:	Dates:
_____	_____	_____
_____	_____	_____

ACTIVITIES PARTICIPATION

Please list any extracurricular activities in which you have been involved (include offices held and honors or awards received).

List any additional obligations to which you are committed for the up-coming year (Student Teaching, Internships, Athletic Teams, Major Offices, Part-time Employment, Etc.).

EMPLOYMENT EXPERIENCE

Please list present and previous work experience. Please start with the most current.

Employer/Position:

Dates:

PERSONAL CHARACTERISTICS

What skills and abilities do you possess that would contribute to your performance as a Resident Advisor?

Please describe any personal characteristics which you possess that make you well qualified for a Resident Advisor position.

How do you feel a Resident Advisor position would enhance your own personal growth?

JOB APTITUDE

Please read the Resident Advisor job description. Of the responsibilities described, which are the most appealing to you?

Which are you most apprehensive about?

REFERENCES

Please list the three individuals you will contact for a recommendation.

Name _____ Position _____ Phone _____

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Name _____ Position _____ Phone _____

In accordance with the Family Educational Rights and Privacy Act of 1974:

I hereby ___ agree ___ do not agree (check one) to waive my right of access to information received by the Residence Life Office concerning my candidacy for the Resident Advisor position.

SIGNATURE

DATE

I understand that this application will be reviewed by Interview Teams. I certify that the information I have submitted is accurate, my own, and the truth to the best of my knowledge. I authorize the release of my academic and disciplinary records for the purpose of verifying my eligibility for this position.

SIGNATURE

DATE

Resident Advisor Recommendation Form

The Resident Advisor is a staff member within the division of Student Affairs who works towards the goal of maximizing the quality of residence hall life by helping students meet their academic, social, and personal potential within a cooperative living environment. Persons in this position are involved in helping and advising individual students, assisting in the management of the residence halls, providing leadership and initiative in developing diverse opportunities for student growth, and supporting and enforcing all university policies.

This form is designed to assist in evaluating the applicants for the RA position. Your candid comments will play an important part in the selection process. Please comment on the applicant's dependability, understanding and acceptance of differences, ability to cope with criticism, problem areas, and any other relevant information.

Thank you for your time.

Please return this completed form no later than Friday February 6, 2009

By mail:

Jane Ferrick
Residence Life Office
2083 Lawrenceville Rd.
Lawrenceville NJ 08648

To the Applicant: Complete the following.

_____ I waive my right of access to this reference form.
_____ I do not waive my right of access to this reference form.

Signature: _____

1. How long an in what capacity have you known this candidate?

2. How well does this candidate relate to students?

3. How has this candidate demonstrated that they are reliable with his/her responsibilities?

4. What strengths of this candidate qualify him/her for this position?

5. What factors might limit this candidate's performance?

Please rate the candidates in the following areas:

	<u>Very Strong</u> Few college students compare	<u>Strong</u> Demonstrates ability often	<u>Adequate</u> Average Ability	<u>Needs Improvement</u> Could be satisfactory with training	<u>Very Concerning</u> Extremely Weak
Listening Skills					
Organizational Skills					
Ability to Take Initiative					
Maturity					
Interactions with Others					
Dependability					
Appreciation of Differences					

Additional Comments:

Printed Name: _____

Signature: _____

Position: _____

Phone Number _____

Email Address: _____

Date: _____

9. What strengths of this candidate qualify him/her for this position?

10. What factors might limit this candidate's performance?

Please rate the candidates in the following areas:

	<u>Very Strong</u> Few college students compare	<u>Strong</u> Demonstrates ability often	<u>Adequate</u> Average Ability	<u>Needs Improvement</u> Could be satisfactory with training	<u>Very Concerning</u> Extremely Weak
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Email Address: _____

Date: _____