Clemson Student Alumni Council
Reference Form

Name of Applicant: _______________________________________________________

Name of Reference: _______________________________________________________

Relationship to Applicant: ________________________________________________

How long have you known the Applicant? ____________________________________

The Student Alumni Council (SAC) is the 35-member leadership council for the Student Alumni Association (SAA). SAC membership is made up of student-volunteers. SAC is chiefly responsible for planning events for SAA members, maintaining a solid SAA benefits package, securing sponsors for SAA, and working at SAA sponsored events. SAC members also participate in various Clemson Alumni Association events and often assist the Alumni Association staff with these events and other sponsored programs.

The membership of SAC works on projects to serve the student body, promote the university, and involve our alumni in current campus functions. Some of our current projects include the coordination of the Welcome Back Festival, the Senior Picnic, the Senior Gift, and the Master Teacher Award. Many of the activities take place at night and on weekends.

There is a high degree of responsibility associated with the honor of being selected as a member of the Student Alumni Council. We would appreciate your honest evaluation of the applicant’s ability to work effectively as a member of the 35-member Student Alumni Council and to represent Clemson University in a positive manner.

Please circle the appropriate answer with “1” representing strongly disagree and “5” representing strongly agree.

1. This applicant can work well with all types of people.
   1  2  3  4  5

2. This applicant has good communication skills – both verbal and written.
   1  2  3  4  5
3. This applicant has the ability to be a good leader.
   1  2  3  4  5

4. This applicant has the ability to work successfully in a group setting.
   1  2  3  4  5

5. This applicant has the time to devote to a volunteer organization of this nature.
   1  2  3  4  5

6. This applicant will represent Clemson University in a positive manner.
   1  2  3  4  5

Please take a moment to share any additional comments: ____________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
Signature: ____________________________ Date: ________________

PLEASE RETURN THIS FORM NO LATER THAN 5:00pm on Friday, February 2th, 2018.

CLEMSON ALUMNI CENTER, 109 DANIEL DRIVE, CLEMSON, SC 29631

The applicant may deliver this reference form to the Alumni Center provided the form is completed in a signed and sealed envelope.

You may FAX a completed form to the Alumni Center: 864-656-0713

If you would prefer this form be sent to you electronically, please send a request to SAA@clemson.edu

Thank you for your cooperation!