Ohio University
Parents Advisory Council (OPAC)
2011-12 Application

Name ____________________________________________

Address ____________________________________________

City ___________________________ State __________ Zip _______

Email ____________________________________________

Daytime Phone ____________________________

Evening Phone ____________________________

Student’s Name ____________________________

Student’s Class Year (circle one)

2014 – 1 position  2015 – 2 positions

Please answer the following questions (on a separate sheet of paper):

1. Why are you interested in joining the Ohio Parents Advisory Council?
2. What do you believe are some of the prevalent issues facing higher education and undergraduate students?
3. What is one suggestion you would provide to enhance the undergraduate experience at OHIO?
4. Describe your past involvement with your student’s school/college/university (OHIO or other).
5. Additional comments.

Mail, fax, or email completed application to:
Ohio Parents Advisory Council
Office of the Dean of Students
345 Baker University Center
Athens, OH 45701
740-597-3301 (fax)
deanofstudents@ohio.edu

Deadline – September 1, 2011