

## **Four-Year Outstanding Service Pin and Academic Recognition Award Application**

### **Award Criteria:**

1. Recipient must be a student at a MACURH member school in good standing to be eligible.
2. Recipient must have been active in his/her campus Residence Life program for at least three and a half academic years. This need not be consecutive semesters, but three and a half total academic years. They may also be at different institutions if all other criteria are met.
3. Recipient must have at least two years involvement with his/her campus residence hall association, relevant residence hall association, NRHH, or other NACURH entities. The other two years may be served in other residential life capacities (resident assistant, desk assistant, program assistant, etc...).
4. Recipient must have attended at least two MACURH recognized conferences, one of which must have been a MACURH regional conference.
5. Recipient must have presented at least one program at a NACURH recognized conference.
6. The applicant must submit an application with a signed verification by the NCC, RHA Advisor or campus equivalent of the Assistant Director of Housing or higher, and RHA President. At a minimum, the application must include the following information:
  - a. A semester by semester breakdown of Residence Life involvement.
  - b. A list of all NACURH recognized conferences attended.
  - c. A list of all programs presented at NACURH recognized conferences.
7. The student must need not be present at the MACURH conference at which he/she is to receive the award; a representative from the recipient's school may accept the award on behalf of the recipient if he/she is not able to attend.
8. The recipient may have graduated within the academic year preceding the MACURH conference where the award is given.
9. The Regional Directorship has the discretion to review the applications and to maintain the integrity of the award.
10. Applicants missing the criteria due to extenuating circumstances may submit a petition to their Regional Director explaining the absence of any criteria. The Regional Director may approve these applications on a case-by-case basis.

**Applicant Information:**

Name: \_\_\_\_\_

School: \_\_\_\_\_

Will you be attending the upcoming MACURH Regional Conference? (circle one) yes no

**Residence Hall Activities:**

Please list your four years of service in the residence halls. There must be at least one activity every year.

Attach an additional sheet if necessary.

Activity: Academic Year (e.g.1995-96):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Conference Attendance:**

List the type (e.g. NACURH, MACURH, etc), year, and location, of all NACURH related conferences that you have attended. You must have attended at least four conferences, including at least one MACURH and NACURH each.

Conference Type: (e.g. NACURH, MACURH, etc.) Year: Location:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Verification:**

Are your four years of involvement all at the same school, or are you a transfer student? (check one)

\_\_\_\_\_ I was enrolled and involved in the residence halls for all four years ONLY at the school named above.

\_\_\_\_\_ For part of my four years, my involvement took place at a different college or university.

If any of the activities you listed on this form or an accompanying sheet occurred at another college or university, please place a star by those activities and obtain some form of written verification for those activities from an advisor at your previous NACURH school(s).

Please enclose an unofficial copy of your transcript(s) that indicate you have had a cumulative 3.0 GPA or better during your four years of service to qualify for academic recognition.

I hereby certify that all of the above information is true and correct. I understand that without proper verification from my NCC, Residence Hall Association President, Residence Hall Association Advisor, and an advisor at any previous schools (if applicable), I forfeit my right to the MACURH Four Year Pin Award.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

We the undersigned RHA President, NCC, and RHA Advisor, hereby certify that all of the information provided by this applicant is true and correct to the best of our knowledge and that he/she meets the requirements for the MACURH Four Year Pin Award.

RHA President: \_\_\_\_\_ Date: \_\_\_\_\_

NCC: \_\_\_\_\_ Date: \_\_\_\_\_

RHA Advisor: \_\_\_\_\_ Date: \_\_\_\_\_

*NCC: Please return to the Regional Director by the specified deadline.*