

Christopher Newport University
Newport News, VA 23606
Application for the office of WCNU Radio Station Manager
Term of Appointment: May 8, 2009 –April 30, 2010

Return complete application by 5 p.m., March 20, 2008. Deliver application and supporting materials to Dr. Ron Von Burg, (ron.vonburg@cnu.edu). Applicants will be contacted for interviews with the Student Media Board, which hires the radio station manager. For information on the Student Media Board, visit <http://clubs.users.cnu.edu/smb>.

Please submit the following by the deadline above:

- 1. A cover letter detailing your interest in the position. Discuss your reasons for applying and your view of the radio station president's role in campus life. What is your vision / plan for the radio station in the coming year?**
- 2. A letter of recommendation from someone who knows your qualifications, particularly as they pertain to radio and/or leadership.**
- 3. A detailed description of the work you have done previously in radio.**

Application for Station Manager for WCNU

Name _____ Social Security No. _____

Address _____ Phone No. _____

E-mail address: _____

Classification: _____ Major _____ GPA _____

Education

College(s) Attended _____

Special Training _____

Publications, Honors, or Awards _____

Qualifications

Please state the qualifications you possess that recommend you for this position:

(Type out on a separate sheet and attach to this application.) _____

Are you available to work during the summer: _____

Experience

Start with your present or last job and work back:

Employer _____ Your Title _____

Duties _____

Employer _____ Your Title _____

Duties _____

Employer _____ Your Title _____

Duties _____

Is there any information that you would like the selection committee to know about you?

Please submit the following:

1. A letter of recommendation from someone who knows your qualifications.
2. Three writing samples, published or unpublished (*e.g.* a class paper).

Application and supporting materials are due to the Student Media Board or the faculty advisor.

I certify that the above information is complete and correct.

Date _____ Signed _____