



*Application & Materials should be mailed to:*  
Allison Beck, Administrative Assistant  
Professional Sales Institute  
Campus Box 5590  
College of Business  
Illinois State University  
Normal, IL 61790-5590

Date \_\_\_\_\_

Full name of Applicant: \_\_\_\_\_

Home Address: Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ SSN: \_\_\_\_\_

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

High School GPA: \_\_\_\_\_ / \_\_\_\_\_ Rank in Class \_\_\_\_\_ / \_\_\_\_\_

ACT Score: \_\_\_\_\_ SAT Score: \_\_\_\_\_ Intended Major: \_\_\_\_\_

High School Activities:

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

Community Service:

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

Awards/ Honors Received:

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

Job Experience:

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

With my signature below, I certify that the information in this application is accurate to my best knowledge.

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