



Application for  
El Paso Community College Student Government Association

Please complete all information as thoroughly as possible. Portions of this form along with a photo, will be displayed during Campaign Week, neatness in completing this form is appreciated. **Please type or print (ink).**

Name: \_\_\_\_\_ Student ID # \_\_\_\_\_

Address: \_\_\_\_\_

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

Telephone Number: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Please check the position you are filing for:

President: \_\_\_\_ Vice President: \_\_\_\_

Treasurer: \_\_\_\_ Secretary: \_\_\_\_ Parliamentarian: \_\_\_\_ Historian: \_\_\_\_

Campus Representatives: \_\_\_\_ Senator: \_\_\_\_

MDP \_\_\_\_ NW \_\_\_\_ RG \_\_\_\_ TM \_\_\_\_ VV \_\_\_\_ MDP \_\_\_\_ NW \_\_\_\_ RG \_\_\_\_ TM \_\_\_\_ VV \_\_\_\_

What is your major or career field? \_\_\_\_\_

How many hours are you currently enrolled? \_\_\_\_\_ credit hours

Do you have reliable transportation? \_\_\_\_\_ Yes \_\_\_\_\_ No

Do you work? \_\_\_\_\_ Yes \_\_\_\_\_ No (If yes, how many hours?) \_\_\_\_\_ hours

Have you attended El Paso Community College before this semester? \_\_\_\_\_ Yes \_\_\_\_\_ No

Please answer the following questions, and you must use a minimum of **40 words**.

1. How would you like to see Student Government contribute overall to the quality of Campus Life? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Briefly describe your past experience or involvement in student activities or clubs (include high school, college, community involvement, etc.)

<u>Organization</u>	<u>Years</u>	<u>Position/Duties</u>
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3. Why is representing students important to you? \_\_\_\_\_

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4. Why would you be a good Student Government member? \_\_\_\_\_

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5. What will you do to strengthen the image of Student Government? \_\_\_\_\_

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6. If elected how will you combat student apathy on El Paso Community College Campuses?

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7. What are some student issues that are of interest to you? \_\_\_\_\_

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All information contained herein is correct and accurate to the best of my knowledge. I am fully aware that misrepresentation of information about myself on this form is grounds for penalty up to and including disqualification by the Election Commission.

**Attach additional sheet if necessary.**

\_\_\_\_\_  
Candidate's Signature

\_\_\_\_\_  
Date