

Division of Enrollment &Student Services 3240 Friars Point Road Clarksdale, Mississippi (662) 621-4155

2015-2016 Student Government Association Officer Application

Position:				
(Please print or type both sides using black ink only) Name: Address:				
The above address will be used for our official mailings. Pleas Phone #:Cell #: Date of Birth: Emergency contact:Ph Parents Name(s):	Email:			
Education: High School Name: Current Classification: Major:	Grad Yr Expected Grad date:			
submission of this application. As a candid stated in the official Student Government	and correct, and that proof thereof can be product late of the SGA Officer title, I have met all of the red Association Officer Candidate contract, and will al ent Government Association Officer Selection Com	quirements pide by the		
Candidate Signature:	Date:			
Sponsor(s) Name:Address:				
Phone Number(s):				
•	andidate and agree to be present at all activities s d approve documents and attire required for this	•		
Authorized Signature:	Date:			

• A Bio sheet detailing information you would like to share with the judges, and for publicity purposes, is required as a part of the application process. Please see the reverse side of this application for details.

Student Government Association Application Requirement:

Please submit a Bio sheet detailing information (awards, hobbies, organizational memberships, future goals, etc...) you would like to share with the judges, and also for publicity purposes. This sheet is required for the application process, and can be written in an outline or resume style. Your name must appear on the top of the sheet, and information should be limited to one side of one sheet. The bio must be typed in Arial font 12 pt. type doubled space. There should be no indenting. The bio should be written in third person.

Additional Information.

	u Injormation.	. 0 11			
*Are you a daughter/son, granddaughter/son, or sister/brother of a past Miss Coahoma Community College					
	YES / NO If yes, who? *Do you have any food allergies or dietary requirements we should know about?				
	D If yes, please list your requirements below:				
1207110	on yes, preuse not your requirements ocion.				
*Please lis	ist newspapers and/or radio stations in your home area to contact:				
*How did	d you find out about the election?				
Initial the	e following items when completed:				
	Application completed and signed				
	Sponsor authorization completed and signed				
	_ Academic Standing Verification Form				
	Official Candidate Contract signed and enclosed				
	Bio Sheet (in outline or resume style) completed and enclosed				
	Essay				

Please do not send in application without these other items listed. Should you have any questions, please contact Ms. LaShasa S. Griffin, for more information.

 3 Sealed Letters of Recommendation are due no later than two days after official deadlines.

2015-2016 Student Government Association Officer

OFFICIAL CANDIDATE CONTRACT

CANDIDATE NAME (Please print):	
2015-20	16 SGA Officer Selection:
I hereby apply as a Candidate for Student Government	Association Officer. I attest to the following:
I am a full time student carrying at least 12 hours;	ship standing, and can produce my transcript of a 3.0 or higher cumulative
grade point average as proof thereof;	simp standing, and can produce my transcript of a 5.0 of higher cumulative
	ization, essay, which meet the specified guidelines, my biography in outling ract. I acknowledge that the SGA Selection Committee reserves the right the nents;
If chosen as SGA Officer, I agree to a one year conofficial contract;	nmitment with the Coahoma Community College and as such will sign th
I agree to relinquish any other title I presently hold vas a member of the Student Government Association.	within the institution if chosen as a SGA Officer and will serve the full term
I am not now, nor have I ever been, a willing party to	o any wrongdoing, corruption, financial impropriety or illegal act;
beginning of the Fall Semester of 2015. In the event and the Coahoma Community College Student Handb and also forfeit the title of the proposed SGA Officer, Student Services. In the event that I do not wish to a	will be awarded to me if I am selected as an SGA Officer, and is paid at the that I fail to abide by the rules and regulations governing this competition ook, I will immediately forfeit the aforementioned educational scholarship if deemed necessary by the Director or Assistant Director of Enrollment avail myself of the educational advantages of this scholarship, then I shahip, I desire to discontinue my education, I shall forfeit any unused portional Financial Aid Program.
Signed:	Date:
Witnessed by:	
(Division of Enrollment and Stud	ent Services Designee only)