

FRESHMEN SENATOR APPLICATION

**This form must be completely filled out and signed on the reverse side in order for a student to qualify for a position in SGA.**

Full Name

Position that you are applying for

ULID \_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail Address \_\_\_\_\_\_

Local Address

(NOT A RESIDENCE HALL ADDRESS)

Local Phone # Cell #

Parents’ Names Phone #

Parents’ Address

Class Major

Polo Shirts Size (Male) \_\_\_\_\_\_\_\_ (Female) \_\_\_\_\_\_\_\_ T-shirt size\_\_\_\_\_\_\_\_\_\_

Date of Birth\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Some of the above information submitted may be used for press releases in your hometown newspaper in the event you are elected. If you do not wish to have this information released, please inform the SGA office.

In order to apply for a freshmen senator position, applicants shall have completed less than thirty (30) semester hours of college credit in a collegiate class setting, or be in their first academic year after enrolling as a first-time freshman (defined as consecutive Fall and Spring Semesters, in that order).

My signature below acknowledges that I give the UL Lafayette Student Government Association my permission to check my academic standing for the purpose of determining my eligibility for candidacy and for eligibility to remain in office if elected.

**Signature Date**

**DEADLINE: Friday, September 17th @ 12:00 PM**

**DATE OF VIRTUAL MANDATORY CANDIDATE’S MEETING:**

**6:00 PM, Tuesday, September 21st**

**(Zoom Link will be emailed to candidates)**

If you have any questions, feel welcome to stop by the SGA office in the Student Union

Room 159 or call 482-2742. Questions can also be emailed to sga@louisiana.edu

Bylaws and Rules Governing Elections

As a candidate for office within the Student Government Association, it is important to understand and be well versed on the Association’s Bylaws and Rules Governing Elections, which can be found at sga.louisiana.edu/who-we-are/governing-docs

It is the responsibility of each candidate to read these documents.

By signing this document, you certify that you have read and understand the UL Lafayette SGA Bylaws and Rules Governing Elections and promise to adhere to the guidelines set forth. You also acknowledge that you understand that any violation of these regulations may invalidate your candidacy.

**SIGNATURE REQUIRED**

**Failure to sign and legibly print name will prevent the applicant from qualifying as a member of SGA.**

**\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PRINT NAME SIGNATURE**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**DATE**

**NO LATE SUBMISSION ACCEPTED**