



# Angelo State University SGA Application

Please indicate the position for which you are applying:

- |  |  |
|--|--|
| <input type="checkbox"/> Freshman Senator  | <input type="checkbox"/> Upperclassman Senator |
| <input type="checkbox"/> SGA Supreme Court | <input type="checkbox"/> Election Commission   |
| <input type="checkbox"/> Executive Cabinet | <input type="checkbox"/> Other                 |

Name: \_\_\_\_\_

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

ASU Email: \_\_\_\_\_

Home: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

CID: \_\_\_\_\_ Major: \_\_\_\_\_ Minor: \_\_\_\_\_

DOB: \_\_\_\_\_ Hours Completed: \_\_\_\_\_ Hours currently enrolled: \_\_\_\_\_

Please select your current classification by earned course hours:

Freshman      Sophomore      Junior      Senior      Transfer      Graduate

*By signing below I authorize the Office of Student Life or the Student Senate to verify any of the above information.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**PLEASE READ BEFORE SUBMITTING YOUR APPLICATION!**

All SGA Applicants must:

- A. Maintain no lower than a 2.00 GPA overall.
- B. Be enrolled in and maintain at least 12 semester hours.
- C. Freshman Senators may have no more than 29 earned Semester Credit Hours.
- D. Upperclassman Senators must have completed at least 30 earned Semester Credit Hours at Angelo State University.
- E. Transfer students with less than 29 transfer hours **may** apply for Freshman Senator but **may not** apply for Upperclassman Senator until they have achieved at least 12 semester credit hours at Angelo State University.
- F. All Senators must attend Senate meetings (weekly), as well as hold one office hour every two weeks.
- G. All applicants are eligible for appointed positions if GPA and enrollment qualifications are met.



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**Why do you want to be part of Student Government at Angelo State University?**

**What qualifications do you bring to Student Government?**

**What would your first Student Government project be?**

## **CANDIDATE RELEASE**

I, \_\_\_\_\_ (*Candidate's Name*), certify that I have read, understand, and agree to all terms as outlined in the current Angelo State University Student Body Constitution and the Angelo State University Election Code in regard to the position of \_\_\_\_\_ (*Title of Desired Position*). I also understand that the violation of any terms in either document is just cause for my disqualification as a candidate or office holder should the violation of the aforementioned terms be discovered after certification of election results.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Please return completed application to the  
Student Government Office, UC 113.**

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### **FOR OFFICE USE ONLY**

Applicant's standing:

Approved\_\_\_ Denied\_\_\_

\_\_\_\_\_  
Executive Director of Student Life

\_\_\_\_\_  
Date