

STUDENT GOVERNMENT ASSOCIATION
APPLICATION FOR CANDIDACY

NAME _____

POSITION FOR WHICH YOU ARE APPLYING _____

COLLEGE IN WHICH YOU ARE MAJORING _____

MURRAY ADDRESS _____

PHONE # _____ EMAIL _____

PERMANENT ADDRESS _____

MSU ID. NO. _____ BIRTH DATE _____

CUM. GPA _____ CLASSIFICATION (RANK) _____

This form must be returned to the SGA office by ****NOON ON MONDAY, APRIL 6, 2009.**** Candidates or a non-candidate representative **MUST** attend a candidates' meeting, **MONDAY, APRIL 6, 2009 AT 4:00 PM IN THE CURRIS CENTER BARKLEY ROOM, 3RD LEVEL OF THE CURRIS CENTER.** Failure to do so will result in that candidate's withdrawal from the election. Candidates may contact the SGA office with questions.

**** ON LINE VOTING ****

ELECTION HELD 9 AM APRIL 20 TO 9 AM APRIL 22, 2009
ELECTION RESULTS ANNOUNCED APRIL 22 AT 5 PM
LOVETT AUDITORIUM

I, the undersigned candidate for a Student Government Association office, have read and understand the Election Rules and Procedures and am aware that failure to comply with said rules and procedures will result in the consequences stated in Student Government Association Constitution and By-Laws. As a strict requirement for membership in the Student Government Association, all senate applicants must have a cumulative GPA of 2.0 AND ALL EXECUTIVE applicants MUST HAVE A 2.7. By signing below, I hereby release authorization to the Student Government Association to check that my GPA meets the requirements stated in the Student Government Association Constitution and By-Laws.

Signature, candidate

Date

*****All candidates must meet the requirements specific to the position for which they are applying for as outlined in the SGA Constitution.**