

## STUDENT GOVERNMENT ASSOCIATION CANDIDATE FOR OFFICE OFFICIAL FORM

OFFICE POSITION SOUGHT:		
Name:		
FIRST	MIDDLE	LAST
Address:		
Сіту	STATE	ZIP CODE
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ELEPHONE:	BEST TIME TO CALL	L
CID #.		
GID #:		
OUR QUALIFICATIONS FOR THIS OFF	FICE: PLEASE WRITE CLEARLY OR AT	TACH A TYPED STATEMENT TO THIS
ORM.		
CANDIDATE SIGNATURE	 Date	