State of Emergency Application Form

Candidate's Name: _____

School's Name: _____

Candidate's Email Address: _____

Candidate's Phone Number: _____

Candidate's Current Level of Latin: _____

Candidate's Grade Level: _____

How many Fall Classics Days have you attended? _____

How many Spring Forums have you attended? _____

How many National Conventions have you attended? _____

In a few sentences, explain why you desire this office and any goals you have while you are in office:

_____

_____

_____

_____

_____

If elected, I _____ (print), will dedicate my best effort to the SCJCL. I am aware of and will accept the responsibilities listed for my office in the SCJCL Constitution and Bylaws, and that, if elected, I am required to attend the National Junior Classical League convention, Fall Classics Day, Spring Forum, and all officer meetings held during my term in office. I also promise that all the information on this application is true, and that if any information on this application is found to be false I will have to leave the SCJCL Board and pay back any money borrowed from the South Carolina Junior Classical League.

Print Name:

_____

Candidate's Signature:

_____

Sponsor:

I recommend _____ for the Office of _____ and Acknowledge that if they are elected, I will fully support them for the entire term. I recognize that if they are elected, they will be required to attend the National Junior Classical League convention, Fall Classics Day, Spring Forum, and all officer meetings held during his/her term in office.

Print Name: _____

Sponsor's Signature: _____

Sponsor's Email: _____

Sponsor's Phone Number: _____

Parent:

I give my permission for _____ to campaign for the Office of _____ and acknowledge that if he/she is elected, I will fully support them for the entire term. I recognize that if they are elected, they will be required to attend the National Junior Classical League convention, Fall Classics Day, Spring Forum, and all officer meetings held during their term of office.

Print Name: _____

Parent's Signature: _____

Parent's Email: _____

Parent's Phone Number: _____