Student Government
Candidate Declaration and Eligibility Form

Last Name ____________________________ First __________ M.I. _______ UNM ID# ____________

Phone 1 __________ Phone 2 __________ UNM E-Mail ________

1. **Return this Declaration Form** to Grace Willerton by email no later than **Thursday, September 3, 2020, at 5:00 PM.**

2. So that all students may be informed of the background and interests of the candidates, please **prepare a 100-word statement** giving your name, some personal information, your experiences, and interests in student government.

3. **Email your statement and a good-quality head shot** to Grace Willerton, gwillert@unm.edu, by **Friday, September 4, 2020, at 12:00 PM.**

   Elections are September 8-10, 2020. You will be informed of your membership status by 5:00, Monday, September 14, 2019.

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**I certify that I am:**

- Currently admitted at **The University of New Mexico-Los Alamos (UNM-Los Alamos)** and enrolled in at least six (6) credit hours there;
- In good standing with **UNM-Los Alamos** (2.5 GPA, no disciplinary probation or suspension);
- Intending to continue my studies at **UNM-Los Alamos** in the spring for at least six (6) credit hours;
- Authorizing the release of my education records to the election officials for the purpose of verifying this information.

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**I understand the information contained in the Declaration of Election.**

**I declare my commitment to participate in a manner that is proper and conducive to the performance of the duties of the office sought through any and all election activities, campaigning activities, and in personal behavior. I will obey all laws, regulations, and decisions of the Student Government Constitution.**

**If elected, I will accept and assume the duties and responsibilities of the listed position.**

**I understand that, to be eligible as a candidate, I must fulfill the requirements stated above.**

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Candidate’s Signature __________________________________________ Date ________________

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**DO NOT WRITE BELOW THIS LINE**

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I verify that the above named student is _____ eligible _____ not eligible

Student Government Advisor Signature __________________________ Date ________________

Updated 08/17/2020