

**MANSFIELD UNIVERSITY**

**STUDENT GOVERNMENT ASSOCIATION**

**SENATOR APPLICATION**

Please return this application to the Student Government Parliamentarian via email, or to the SGA Office

located in Alumni hall.

**SGA Parliamentarian Contact Information:**

**teeterdr09@mansfield.edu**

Daniel Teeter 2023-2024

**Senate Applicant:**

On behalf of the entire Student Government Association, I want to thank you for showing interest in serving your fellow peers by applying for a position in Mansfield University’s student-run and funded legislative body.

The Mansfield University Student Government Association, henceforth also referred to as “SGA,” was created by and for the students. Our mission is for our students to serve their fellow students. Student Government conducts its business and engages in projects that are dedicated to advancing the overall quality of the total learning experience at Mansfield University.

The weekly meeting times have been set for Tuesday nights at 6:00pm.

SGA is composed of a Senate, House of Representatives, and the Executive Board, which is comprised of seven individuals holding the positions of President, Vice President, Parliamentarian, Director of Public Relations, Treasurer, Secretary, and Director of Information and Technology.

Two distinct individuals also sit on SGA to advise the body; these two being the Chief Officer for Student Affairs (or designee), a position nominated by the university president and approved by SGA, and a faculty representative, a position appointed by the university Senate.

Please review the SGA Constitution and Bylaws as well, once you have applied for membership in this organization, to familiarize yourself with the association’s rules and regulations. As a point of information, all Senators serving with SGA are required to participate in one subcommittee of the organization or a university approved committee. The Vice President is in charge of all recruitment efforts for SGA and questions regarding mandatory committee service can be directed to that office.

Please review and answer all information and questions within this application packet and deliver it in person to the SGA office in Alumni Hall or via email to the Parliamentarian.

Thank you,

*Your Student Government Association*

**SGA Senator Application Form**

Name:

Email Address: @mansfield.edu

Phone Number:

Class Year: \_

Major (s): \_\_Minor (s):

What extracurricular activities, specifically leadership roles, are you involved in on campus?

In your personal opinion, what is your greatest strength and your greatest weakness, and how do you plan to improve the latter?

Please list three things, in your personal opinion, that require improvement at Mansfield University.

Please list three things this institution succeeds at accomplishing.

What do you feel defines you as a good leader? And how would you personally define leadership?

How did you find out about SGA?

\_\_\_\_\_\_

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**CONFLICT OF INTEREST**

**DISCLOSURE FORM**

Please fill out the form below and return to the Parliamentarian. If any information on this form changes at any point it is your responsibility to submit an updated form. Thank you!

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

**Submitted On**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Received On**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SGA Position:** Senator Representative

In the space below, please list all student organizations, clubs, and activities in which you are involved in at Mansfield University.

**Involvement (Member, Board Position, etc.)**

**Organization / Club / Activity Name**

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I affirm that all information on this form is, to the best of my knowledge, true and accurate. I understand that failure to disclose any organizations / clubs / activities for any reason could result in dismissal from Student Government.

**Signature**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date**: \_\_\_\_ / \_\_\_\_ / 20\_\_\_\_\_