

# 2019 Session Legislative Page Application



Preferred deadline: **Monday, October 15, 2018.**

**Final** deadline for all applications: postmarked on or before **Monday, November 12, 2018.**

*Supervision of pages by the Legislative Research Council is limited to the actual performance of their duties during the legislative day within the Capitol complex. The Legislative Research Council is not responsible for any activity that is not directly work related.*

*Please print clearly*

**NAME:** \_\_\_\_\_  
(First) (MI) (Last)

**ADDRESS:** \_\_\_\_\_  
(Street or P.O. Box)

\_\_\_\_\_  
(City) (Zip Code) (County)

**CELL PHONE:** \_\_\_\_\_ **ALTERNATE PHONE:** \_\_\_\_\_  
(Include Area Code) (Parent/Guardian – include Area Code)

**PREFERRED E-MAIL ADDRESS:** \_\_\_\_\_

Have you previously served as a page? Yes  No  Gender: Male  Female

Are you related to a Member of the South Dakota Legislature? Yes  No

If yes, please state relationship and to whom: \_\_\_\_\_

**HIGH SCHOOL:** \_\_\_\_\_

**GPA:** \_\_\_\_\_ **Junior**  **Senior**   
(At least 3.0 encouraged) (Seniors will be given preference)

Please list some of the extracurricular activities in which you are involved such as Boys/Girls State, Debate, Music, Sports, etc. \_\_\_\_\_

**NOTE: For payroll processing, you must include a legible copy of your SIGNED Social Security card with your application.**

**PLEASE SPECIFY YOUR FIRST, SECOND, THIRD, FOURTH, AND FIFTH PREFERENCES FOR THE TIME FRAME IN WHICH YOU WOULD LIKE TO SERVE. ALSO, INDICATE IF YOU CANNOT SERVE A PARTICULAR TERM.** *NOTE: Dates of terms are subject to change. The last day of the fifth term may be long, so you should plan to stay in Pierre on that Wednesday night, if necessary.*

TERM	DATES OF SERVICE (Approximate)	PREFERENCE (Indicate 1 <sup>st</sup> -5 <sup>th</sup> choice)	CANNOT SERVE THIS TERM ✓
1 <sup>st</sup> Term	January 7 through January 17		
2 <sup>nd</sup> Term	January 22 through January 31		
3 <sup>rd</sup> Term	February 5 through February 14		
4 <sup>th</sup> Term	February 19 through February 28		
5 <sup>th</sup> Term	March 4 through March 13		

**PRINT YOUR NAME (FIRST & LAST) EXACTLY AS YOU WANT IT TO APPEAR ON YOUR NAMETAG:**

**If selected, would you need housing arranged for you?** Yes  No

**THREE SIGNATURES OF APPROVAL ARE REQUIRED ON THIS APPLICATION:**

**YOUR SCHOOL; A SPONSORING LEGISLATOR OR LEGISLATOR-ELECT; AND, YOUR PARENT/GUARDIAN.**

**SCHOOL**

*I, the undersigned School Principal or Superintendent, do hereby give permission for this applicant to serve as a Legislative Page during the next session of the Legislature.*

\_\_\_\_\_   
 School Principal or Superintendent **Printed Name**

\_\_\_\_\_   
 Title

\_\_\_\_\_   
 **Principal or Superintendent Signature**

\_\_\_\_\_   
 Date

**LEGISLATOR OR LEGISLATOR-ELECT**

*I, the undersigned Member or Member-Elect of the South Dakota Legislature do hereby sponsor and recommend this applicant for service as a Legislative Page during the next session of the Legislature.*

\_\_\_\_\_   
 Member, South Dakota Legislature **Printed Name**

\_\_\_\_\_   
 **Member, South Dakota Legislature Signature**

\_\_\_\_\_   
 Date

**PARENT/GUARDIAN**

*I (we), as parent(s) or guardian(s) of this applicant, grant permission for the applicant's participation, if selected, in the Legislative Page Program.*

\_\_\_\_\_   
 Parent or Guardian **Printed Name**

\_\_\_\_\_   
 **Parent or Guardian Signature**

\_\_\_\_\_   
 Date

**PLEASE ATTACH AT LEAST TWO LETTERS OF REFERENCE. (Reference letters may be sent directly to the LRC.)**

REFERENCE NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

REFERENCE NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

**How did you hear about the Page Program?** Government Teacher \_\_\_ Guidance Counselor \_\_\_ Other School Personnel \_\_\_ Parent \_\_\_ LRC Website/Facebook \_\_\_ Legislator \_\_\_ Former Page \_\_\_ Other, please list \_\_\_\_\_

**REMEMBER....**

- COMPLETE ALL ITEMS ON THE APPLICATION
- INCLUDE A **SIGNED**, LEGIBLE COPY OF YOUR SOCIAL SECURITY CARD FOR PAYROLL PROCESSING
- ATTACH TWO LETTERS OF REFERENCE

**Please return application to:**

Page Advisor

Legislative Research Council

500 East Capitol

Pierre, South Dakota 57501-5070

Phone: 605-773-3251 – Fax: 605-773-4576 – Email: [LRC@sdlegislature.gov](mailto:LRC@sdlegislature.gov)

**Page Program Information:** <http://sdlegislature.gov/Students/PageProgram>