



Las Positas College Student Government

General Election Application 2021

Application and forms must be submitted electronically to Josue Hernandez, via email at jahernandez@laspositascollege.edu on or before Friday, March 26, 2021, at 5:00 p.m.

POSITION APPLYING FOR: *For full description of all position duties, please review the [LPCSG Bylaws](#).

- ☐ President
- ☐ Vice President
- ☐ Director of Legislation
- ☐ Director of Communication
- ☐ Director of Events
- ☐ Inter-Club Council Chair
- ☐ Student Trustee

PERSONAL INFORMATION (Please Type)

Full Name: _____ Student W#: _____
E-mail address: _____ Telephone #: _____
Intended Major: _____ G.P.A.: _____
Possible [virtual] office hours: _____

Please answer the following questions. Keep each response to a 100-word limit. **Your responses and photo will be posted on our website**

1. Why do you wish to run for an LPCSG Officer position?
2. Please list your current or past leadership experience
3. What makes you stand out in comparison to other candidates for the position in which you are applying?
4. What aspects of student life would you seek to improve? How would you do so?

You must email your question responses *along with your pdf application and a photo of yourself as attachments to Josué Hernández, Program Coordinator of Student Life and Leadership, at jahernandez@laspositascollege.edu on or before Friday, March 26, 2021, at 5:00 p.m.*

Please note that per District Board Policy, all candidates are required to have and maintain a minimum cumulative grade point average (GPA) of 2.0, and must be currently enrolled in at least five (5) units and maintain enrollment in an of five (5) semester units per semester. Verification of eligibility will be performed by the Student Life Office staff after submission. Candidates are required to complete the attached LPCSG General Election Application indicating the position for which they are applying and answer the candidate questions. This information may also be published in the Las Positas College newspaper, The Express. By signing this form, you authorize the use of photos and images of you for use by Las Positas College for purposes of marketing and media relations. Use of these images may include, but not be limited to, class schedules, catalogs, newsletters, magazines, newspapers, brochures, student recruitment materials, posters, postcards, direct mail, multimedia presentations, and web sites.

I READ AND UNDERSTAND ALL RULES AND PROCEDURES, AND WILL FOLLOW THEM COMPLETELY.

Name: _____ Date: _____

Signature: _____



LPCSG Election Campaign Guidelines

1. Candidates will be allowed to post flyers online via social media and the LPCSG Elections webpage.
2. Flyers must be approved by Josué Hernández, Program Coordinator of Student Life and Leadership, at jahernandez@laspositascollege.edu before online posting.

All electronic campaign materials and verbiage must meet the Chabot-Las Positas Community College District discrimination policies. CLPCCD is not liable for the content and management of the applicants' social media accounts.

By signing this form, you agree that you understand and will follow the guidelines and procedures for the publicity of your campaign. Failure to abide by the guidelines set forth on this waiver, along with the election packet, could lead to disciplinary actions and the disqualification of your campaign.

I HAVE READ, UNDERSTAND, AND WILL FOLLOW ALL THE RULES AND PROCEDURES COMPLETELY.

Name: _____ Date: _____

Signature: _____



Discrimination Statement

The word “discrimination” is used in this document to describe behavior and language of a prejudicial nature. For clarification and further understanding of discrimination, we have provided explanations of the different types of harassment.

The definitions include but are not limited to:

Verbal harassment: i.e., epithets, derogatory comments or slurs on the basis of race, religion, color, sex, age, national origin, ancestry, ethnic group identification, physical or mental disability, marital status, or sexual orientation.

Physical harassment: i.e., assault, impeding or blocking movement or any physical interference with normal work or movement when directed at an individual on the basis of race, religion, color, sex, age, national origin, ancestry, ethnic group identification, physical or mental disability, marital status, or sexual orientation.

Visual Harassment: i.e., derogatory posters, notices, bulletins, cartoons or drawings on the basis of race, religion, color, sex, age, national origin, ancestry, ethnic group identification, physical or mental disability, marital status, or sexual orientation. Should any discrimination be observed in a candidate’s campaign, they will be subjected to discipline and disqualification.

By signing this form, you completely understand the guidelines and procedures for the non-discriminative process of your campaign. Failure to abide by this waiver, along with the election packet, could lead to disciplinary actions and the disqualification of your campaign.

I HAVE READ, UNDERSTAND, AND WILL FOLLOW ALL THE RULES AND PROCEDURES COMPLETELY.

Name: _____ Date: _____

Signature: _____



CLPCCD Photo and Video Release

I hereby give Chabot-Las Positas Community College District and TriValley One-Stop Career Center ("CLPCCD") the absolute right and permission, with respect to the photographs and/or videotaped images taken of me or in which I may be included with others, to use such images for training and/or promotional purposes.

Furthermore, Chabot and Las Positas Colleges are authorized to use/print my name in conjunction with such images and/or related quotes given by me. This authorization and release shall also apply to the benefit of the legal representative and licensees of Chabot-Las Positas Community College District and Tri-Valley One-Stop Career Center, as well as the person(s) for whom the photographs, videotaped images, and/or quotes were taken.

Signature

Date

Printed Full Legal Name

Are you at least 18 years of age?

☐ Yes

☐ No

Signature of Parent/Legal Guardian (if the individual is a minor)

Date

Contact Information

Home Phone: (_____) _____

Cell Phone: (_____) _____

Email: _____

Address: _____

City: _____ State: _____ Zip Code: _____