



# ASSOCIATED STUDENTS OF HELENA COLLEGE

## Application for Senator

Name:	Club Represented: (if applicable)
Program:	Phone Number:
Date:	Student Email:

Please circle next to the Requirements List:

Yes	No	
<input type="checkbox"/>	<input type="checkbox"/>	Have you read the ASHC Constitution and Bylaws?
<input type="checkbox"/>	<input type="checkbox"/>	Will you be enrolled in at least three credits at Helena College? *
<input type="checkbox"/>	<input type="checkbox"/>	Will you be available for ASHC Meetings? (Scheduled for Tuesdays @ 1:00 p.m)
<input type="checkbox"/>	<input type="checkbox"/>	Will you be available for Committees as they arise in ASHC?
<input type="checkbox"/>	<input type="checkbox"/>	Will you be willing to attend ASHC Sponsored Events?
<input type="checkbox"/>	<input type="checkbox"/>	Are you familiar with Microsoft Outlook?
<input type="checkbox"/>	<input type="checkbox"/>	Are you familiar with Teams/ Zoom?
<input type="checkbox"/>	<input type="checkbox"/>	Would you be interested in being involved with Montana Associated Students? **

Please explain why you want to be a Senator of the Associated Students of Helena College (ASHC).

---



---



---



---



---



---



---



---



---



---

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please Print and Sign.

\* You must be a currently enrolled student at Helena College to apply.

\*\* Please ask for more information about Montana Associated Students if interested.