



**ASSOCIATED STUDENTS  
OF HELENA COLLEGE**

**Application for Senator**

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

Please check 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 Mondays @ 11:00 a.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.