

2024 Maryland General Assembly Student Page Application Form

DIRECTIONS: 1. Type sections that can be filled in. 2. Print out. 3. Hand-write signatures and dates. 4. Submit application electronically, through the supplemental application form, as well as mailing it to Michelle Dean (850 Hungerford Drive, CESC Room 269, Rockville, MD 20850) by Monday October 16th, 2023. For more information, contact Michelle Dean, Instructional Specialist for Student Leadership and Extracurricular Activities, at Michelle_D_Dean@mcpsmd.org or Dr. Tawana Offer, Maryland General Assembly Page Coordinator, at Tawana.Offer@mlis.state.md.us

1. **Name:** _____ **Age:** _____
2. **Date of Birth (Month/Day/Year):** / / **Sex (M/F):** _____
3. **Home Address:**
- City:** _____ **State:** _____ **Zip Code:** _____
- Student Cell Phone:** - **Parent Phone:** -
- Student Email:** _____ **Parent Email:** _____

4. **High School Name:** _____

County School System: _____

5. I hereby state that I am a 12th grade student at the school identified above and will graduate in June 2024. I promise to abide by all rules and regulations established by the Page Supervisors and understand that I could be dismissed from the program if I do not do so.

_____ **Date**

_____ **Student's Signature (hand written)**

6. **Parent/Guardian Permission for Participation**

If selected by the School System Selection Committee, my son/daughter has my permission to participate in the Student Page Program for the Maryland General Assembly. I am aware that this will involve his/her being away from school and in Annapolis for two one-week periods during the legislative session. I also understand that students will be supervised only during working hours within the State House Complex. The Page Supervisors and members/staff of the Maryland General Assembly and the state and local school systems are not responsible for the participants outside actual working hours. In addition, hosts of the homes in which Pages and Alternates reside during their stay in Annapolis are not responsible for the welfare of the Pages and Alternates beyond the provision of lodging.

_____ **Date**

_____ **Parent's/Guardian's Signature (hand written)**

7. **Parental Permission for Release of Name/School to the Press and/or use of image on promotional materials, including, but not limited to posters and website content. Please check: YES NO**

_____ **Date**

_____ **Parent's/Guardian's Signature**

8. **Exams:** We do not knowingly schedule Pages during their exams week. Please designate the week(s) your school will hold exams if it falls during the months of January-April.

Exam Week(s): _____

Does Not Apply:

NOTE: Additional application material may be required by your county.