

Services Office by the LAST DAY OF CLASSES IN JANUARY.









Student Trustee Application-Petition

Page 1: APPLICATION

<u>Please Print</u>	
Student Name:	Student ID Nbr:
Address:	
Email:	Telephone Nbr:
Indicate why you would like to serve	as the Student Trustee:
I hereby request my name be placed	on the ballot for the election of the Student Trustee for the Illinois
. •	29 Board of Trustees. I understand that as the Student Board
	e IECC student body and the Board of Trustees. As such, I will I understand that if elected, I will receive the oath of office at the
April board meeting and serve throug	sh the March board meeting. I understand meetings are scheduled
monthly at locations throughout the	district and my attendance is expected.
If elected and my full-time student sta understand I will automatically forfeit	atus at IECC is not maintained through my Board of Trustee term, I t my position as Student Trustee.
Student Signature:	Date:
Return this application/petition, alor	ng with your Declaration for Candidacy form, to the Student











Page 2: PETITION

A minimum of twenty-five (25) signatures, along with legible printed names and legible student ID numbers, <u>from</u> **full- or part-time students currently enrolled in for credit classes at this campus** is required.

<u>Printed Name</u>	<u>Signature</u>	Student ID Nbr
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