

**2010 MARYLAND GENERAL ASSEMBLY
STUDENT PAGE APPLICATION FORM**

PLEASE TYPE or PRINT CLEARLY

1. Name: _____ Age: _____

2. Birthday: MO _____ DAY _____ YR _____ Gender _____ Social Security No: _____ : _____ : _____

3. Home Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: () _____ - _____ Cell Phone: () _____ - _____

Email: _____

4. High School Name: _____

School Phone: () _____ - _____ County School System _____

5. *I hereby state that I am a Grade 12 student at the school identified above and will graduate in June 2010. I promise to abide by all rules and regulations established by the Page Supervisor and understand that I could be dismissed from the program if I do not do so.*

Date

Student's Signature

6. Parental 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, non-consecutive 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 may 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

7. Parental Permission for Release of Name/School to the Press:

If selected by the school system selection committee, I give permission for the release of my son/daughter's name and school name to the press. Please circle: YES NO

Date

Parent's/Guardian's Signature

8. Exams: For the purpose of scheduling work weeks if you are selected to be a page, please designate the week(s) your school will hold exams if it falls during the month of January or February.

Does Not Apply: _____ Exam Week(s): _____

DEADLINE FOR APPLICATION: 4:00 p.m., Friday, October 23, 2009

Applications (including essay questions) should be forwarded to:

Mrs. Karen L. Crawford, County Page Coordinator
MONTGOMERY COUNTY PUBLIC SCHOOLS
Student Affairs Office, 1200 Main Street
Gaithersburg, Maryland 20878

(FAX: 301-670-1407)
(PHONE: 301-670-1419)

