



**COLLEGE STUDENT COUNCIL ELECTION
APPLICATION FOR CANDIDACY
SY 2024-2025**

FORM 1 – Individual Application

Full Name (Last, Given, Middle)	
Course and Year Level	
Mobile Number	
Email Address	

Party (If none, indicate Independent)	
Position	

What inspired you to run for office?

List down your platform/s specific to the position you are running for. Add additional rows if necessary.

- 1
- 2
- 3

List down your collegiate leadership experience (whether internal or external). Add additional rows if necessary.

Organization (Do not abbreviate or use acronym.)	Position	Period (Month Year to Month Year)	Specific Role/Responsibilities

Student Affairs and Services' use only.

	SDAD	GCD	SDD
Clearance			



CERTIFICATION AND ACKNOWLEDGEMENT

I have read the College Student Council Constitution and By-Laws and I understand the responsibilities of the position I am running for. I commit myself to this endeavor - recognizing and acknowledging the physical, emotional, and mental challenges that I may face if elected to office.

I hereby certify that the information given and the requirements submitted for candidacy are true and correct.

Should I fail to satisfy the requirements for candidacy, I understand that this shall disqualify me to run for or hold any position in the College Student Council.

Further, should I win the election, I understand that I must comply and meet the following continuing requirements while in office, to wit:

- a. I should not commit any major offense and be found guilty of any major disciplinary case.
- b. I should not be in academic probation status and should maintain my academic grades by having no failing grade in any of my subjects, and must maintain a weighted point average of at least 83% every semester.

I understand that once I commit and violate any of the continuing requirements mentioned above, I will be automatically disqualified to continue my service as Officer of the Student Council.

Furthermore, should the minimum 51% of the voters' turnout is not reached, I agree that the COMELEC may declare failure of election and as a consequence, representatives coming from the different Colleges may be appointed by the Student Affairs and Services Director to fill up the College Student Council positions for School Year 2024-2025.

Signature : _____
Date : _____



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FORM 2 – Party Summary

Party Name (If acronym, spell out first.)	
Party Vision	
List down five (5) student concerns that you want to address.	
1.	
2.	
3.	
4.	
5.	
Major platforms according to SPECIAL	
Social Development	1 2 3
Physical Development	1 2 3
Ethics	1 2 3
Career	1 2 3
Intellectual Development	1 2 3
Aesthetics and Culture	1 2 3
Leadership	1 2 3



Candidates

(If no candidate, write No Candidate. Do not leave the space blank.)

	Full Name	Course and Year Level
President		
Internal Vice President		
External Vice President		
Secretary		
Treasurer		
Auditor		
PRO		
Social Development Committee Chair		
Physical Development Committee Chair		
Ethics Committee Chair		
Career Committee Chair		
Intellectual Development Committee Chair		
Aesthetics and Culture Committee Chair		
Leadership Committee Chair		

Notes:

1. If running as a party, representative of party should submit Form 1 of all candidates and Form 2 in PDF format. These documents should be emailed to sdad@mtc.edu.ph on or before March 15 in one email only.

Subject format: <Candidacy>_<Name of Party>; if independent, <Candidacy>_Independent

2. If running as independent President, submit Forms 1 and 2. If running as independent for positions other than President, submit only Form 1.
3. Option 1: Print the form and affix signature. Scan and submit in PDF format.
4. Option 2: Affix electronic signature. Save and submit in PDF format.



**COLLEGE STUDENT COUNCIL ELECTION
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FORM 3 – Substitution Form

Full Name (Last, Given, Middle)	
Course and Year Level	
Mobile Number	
Email Address	

Party (If none, indicate Independent)	
Position	
Replacing which candidate	

What inspired you to run for office?

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- 1
- 2
- 3

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