The governing body of the Associated Students of the University of Hawai‘i Maui College is a Government Council composed of enrolled students with a minimum of 5 and a maximum of 11 Council members.

There are 4 Executive Council Officers: President, Vice President, Secretary, and Treasurer, plus 2 University of Hawaii Student Caucus Representatives that work collaboratively statewide with other University of Hawai‘i campus Student Governments.

**Purposes & Functions:**

The Government Council will perform all the duties assigned within the Charter.

The Government Council shall be responsible for the enforcement of the Charter and the promotion of student participation in advocacy, leadership, and policy.

The Government Council will perform all the duties assigned within the Charter.

The Government Council shall be the approving authority for all appointments by the President, as well as annual budget adoption and expenditures.

The Government Council shall maintain authority over ASUHMC funds and assets.
ASUHMC STUDENT GOVERNMENT: VACANCY INSTRUCTIONS
If you are interested in serving on the ASUHMC Student Government Council as a Council Member or Executive Officer you must complete and submit the following forms:

1. Notice of Intent and Eligibility Form (S-1)
2. Confirmation of Eligibility Form (S-2)
3. Resume
4. Personal Statement
5. Letter of Recommendation from one of the following:
   • UHMC Faculty or Staff member or Current Employer

Submit all completed forms to the Student Government Advisor Francine Ching; Mailroom Box #188 or at the Student Life Office, Pilina Building, 2nd Floor. **Incomplete packets will not be accepted.**

Eligibility for Student Government Council Member:

1. Currently registered UH Maui College student.
2. Good academic standing, minimum 2.5 GPA

More information regarding the upcoming Elections is forthcoming.

For more information please email: Francine Ching at francine@hawaii.edu
NOTICE OF INTENT AND ELIGIBILITY
Form S – 1

I,_______________________________ , am seeking nomination from within the Associated Students of the University of Hawai‘i Maui College for a position on the ASUHMC Student Government Council. My term will run from May 2017 to May 2018. I understand the requirements of Council Membership and maintaining eligibility as delineated in the ASUHMC Student Government Charter. The Student Government Faculty Advisor has confirmed my eligibility.

Upon verification of my eligibility I will become a candidate in the Student Government Council. If appointed, I will discharge my duties and responsibilities in the interest of the Associated Students of UHMC to the best of my ability.

___________________________________________
Student ID #      Signature      Date

________________________________________
Student Government Advisor      Date

________________________________________
ASUHMC Council President      Date

________________________________________
Vice Chancellor, Student Affairs      Date

*Signing the Notice of Intent and Eligibility form will result in the release to the above parties every semester, while in office, in order to verify continued eligibility.
CONFIRMATION OF ELIGIBILITY
Form S – 2

Name of Nominee (Print)
________________________________________________________________________________________

Student Identification Number: ___________________________ Phone Number: ______________________

Major: ___________________________________________________________________________________

Term of Office __________________________ to __________________________

I, ______________________________________________________________________________________,
am seeking Election or appointment to the Associated Students of the University of Hawai‘i Maui College
Council. I understand the requirements of eligibility, office, and maintaining eligibility of office delineated in
ASUH – MC Charter.

_____________________________________________________________________________
Signature of Candidate Date

*Signing the Confirmation of Eligibility form will result in the release to the above parties every semester,
while in office, in order to verify continued eligibility.

FOR STUDENT LIFE USE ONLY

Enrolled (Yes / No) Semester: __________________________ Major: __________________________

Current Credits: ___________ Cumulative Credits: ___________Cumulative GPA: ___________

Information Certified Correct (Yes / No) Discrepancies:
____________________________________________________________________________________

Certification by: ___________________________ Position: ___________________________

Date: __________________________

Revised 2/2/18