2015
DISTRICT STUDENT TRUSTEE
Election
Packet

Compiled and distributed by the Student Trustee Advisory Council

Election Code: http://www.4cd.edu/gb/policies_procedures/student/S3029.pdf

PACKET CONTENT LIST

☐ Election Timeline
☐ DST Application
☐ Violation Report

☐ Candidate Endorsement Form
☐ Candidate Expense Report
2015
DISTRICT STUDENT TRUSTEE
ELECTION TIMELINE

ACTIVITY ..........................................................DATE

CANDIDATE APPLICATION
Candidate Materials Available ........................................................................March 2
Candidate Information Meeting (Student Life Office, 2:00 PM) .......................March 10 & March 18
Applications Due (Student Life Office, 4:00 PM) ........................................March 25
Candidate Eligibility Posted (Student Life Office, 12:00 PM) ........................March 27

PRIMARY ELECTION (If More than 3 Candidates)
Primary Candidate Mandatory Orientation (Student Life Office, 10:00AM-11:00 AM) ........................................March 30
Primary Campaign Period Begins (5:01 PM) ................................................March 30
Primary Candidates Debate (Location TBA, 12:00 – 1:00 PM) ........................April 15
LMC PRIMARY ELECTION DATES: ............................................................April 20-22
Voting occurs on-line. Polls open on April 20 at 9:00 AM and close on April 22 at 5:00pm. * Voting occurs in conjunction with LMCAS elections.
Expense Report Due (Student Life Office, 4:00 PM) ....................................April 23
Violation Report Deadline (4:00 PM) ..........................................................April 23
All Primary Campaign Publicity Removed (5:00 PM) ....................................April 24
Primary Election results announced and posted (Student Life Office, 12:00 NOON) ......................April 27

DISTRICT-WIDE ELECTION
NOTE: If there are 3 or fewer candidates for the District Student Trustee, there will be no Primary Election, and Campaigning for the District-Wide Election may begin on March 30 at 5:01PM.
Mandatory Candidate Orientation (Student Life Office, 12-1 PM) .........................April 27
District-wide Campaign Period Begins (5:00 PM) ........................................April 27
Candidate Debates at CCC, DVC and LMC will be coordinated in conjunction with Associated Students at each campus
DISTRICT-WIDE ELECTION DATES: ..................................................May 11 - 13
* Voting occurs on-line. Polls open on May 11 at 9:00 AM and close on May 13 at 5:00pm.
Expense Report Due (Student Life Office, 4:00 PM) ....................................May 15
Violation Report Deadline (Student Life Office, 4:00 PM) ................................May 15
All Campaign Publicity Removed (5:00 PM) ..............................................May 15
District-Wide Election results announced and posted (Student Life Office, 12:00 NOON) ..................May 19

NEW STUDENT TRUSTEE
New Student Trustee Introduced at Governing Board Meeting (6:00 PM) ...........May 27
New Student Trustee Begin Duties ..................................................................June 1
Contra Costa Community College District
District Student Trustee Application

Name: ________________________________  Student ID #: __________

Mailing Address: 

Phone #: ___________________________  Email: ___________________________

By signing below, I hereby affirm:

- I am enrolled in and will maintain at least 5 units at Los Medanos College.
- I have and will maintain a cumulative grade point average of at least 2.0.
- I am in good standing with the District in terms of discipline.
- I understand and will uphold the role of the District Student Trustee, as outlined in the Rules and Regulations of the Governing Board.
- I understand that failure to maintain the requirements of the District Student Trustee position will result in my removal from the position.

I understand that the Student Life staff will verify the above qualifications as part of the application process. I hereby authorize release of my educational and disciplinary records to the Student Life Office as part of the verification process. In addition, I authorize the use of my responses to items 1 and 4 below for public informational purposes including, but not limited to, publication on the District Student Trustee election website.

Signature  Date

The following items must be attached in order to complete your application for the District Student Trustee position. Failure to include any of the items listed below will result in disqualification.

(1) A letter of intent outlining your qualifications and reasons for seeking office;

(2) A resume;

(3) Unofficial transcripts;

(4) Written response to two standard questions developed by the Student Trustee Advisory Committee (see page two of application).
Please respond to both questions. You may attach additional sheet(s), if necessary. If possible, please type your responses.

Please respond to both questions. You may attach additional sheet(s), if necessary.

1. How do you envision serving in the role of Student Trustee in representing three campuses but being hosted by one individual campus (in this case, Los Medanos College)? If there were a conflict of needs between individual campuses, how would you, in your role as Student Trustee, effectively address and resolve the conflict?

2. Give an example of a project or issue that was addressed by a club, committee, or group that you represented and/or led. Describe the goal, the number of people involved and affected, and the outcome.
Please complete this form and submit it to the Student Life Office PRIOR to public announcement of candidate endorsement.

Please note that student clubs, organizations, associations, and individuals approving endorsements of a candidate may only make a number of candidate endorsements equal to the number of positions available.

Club/Organization/Self: ___________________________  Meeting Date: ________________

If Club or Organization: Attendance of Club/Organization Members (list first and last names - use back of paper or attach additional sheet for more attendance. PRINT CLEARLY AND LEGIBLY):

__________________________________________________________________
__________________________________________________________________
__________________________________________________________________

1. Motion: _______________________________________________________

__________________________________________________________________
__________________________________________________________________

2. Made by: _______________________Seconded by: ______________________

3. # of Yes Votes: # of No Votes: ________________________________

Club Secretary’s Signature  Date  Club Advisor’s Signature  Date

If no Secretary’s signature then the two Designated Officers’ signatures (below) are needed. (Club Advisor’s Signature is always required)

Designated Officer’s Signature  Date  Designated Officer’s Signature  Date

If individual: (please print your endorsement and sign at bottom of form.)

___________________________________________  _________________________

Individual Signature: _________________________  Date: ________________

Student Life Staff: _____________________________  Received Date: _________
District Student Trustee Election
EXPENSE REPORT

For PRIMARY: Due April 23 at 4:00PM
For District-Wide ELECTION: Due May 14 at 4:00PM

* Please attach receipts to this form.

Candidate Information:

Name: ____________________________________
College: ___________________________________
Student ID: ________________________________
E-mail: ____________________________________
Phone Number: ______________________________

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Total: ______________________________________

NOTE: Attach additional sheets to detail expenses, if necessary.

_________________________________________        ____________
Signature of the Candidate                      Date

_________________________________________        ____________
Signature of the Student Life Staff              Date

Return to Student Life Office by 4:00 PM, April 23, 2015 for PRIMARY and May 15, 2015 for ELECTION

Note to Office Staff:
1. Date stamp form
2. Mailbox: Demetria Lawrence
District Student Trustee Election
VIOLATION REPORT

Name ______________________________________ Student ID # ___________________

Address ___________________________________________ City ___________________ ZIP __________________

Phone: ______________________ Work: ______________________ Cell: ______________________

E-mail: _____________________________________________

Semester most recently enrolled: ____________________________ Campus: _____________________________

Only grievances submitted on this form and answering all questions will be considered.

1. What is the specific nature of the grievance and who was involved?
_____________________________________________________________________________________________
_____________________________________________________________________________________________
_____________________________________________________________________________________________

2. What specific CCCCDD Election Code section, rule, regulation, law, or student right do you allege has been violated?
_____________________________________________________________________________________________
_____________________________________________________________________________________________
_____________________________________________________________________________________________

3. List all the facts that substantiate your claim.
_____________________________________________________________________________________________
_____________________________________________________________________________________________
_____________________________________________________________________________________________

4. Is there any other information you wish to present at this time?
_____________________________________________________________________________________________
_____________________________________________________________________________________________

5. Are there any documents you wish to have considered? If so, please attach a copy to this form and note specific sections being cited.

________________________________ __________________________
Signature Signature Date

________________________________ __________________________
Student Life Staff Date

Completed forms must be turned in to the Student Life Office within 2 days of the violation and no later than the first business day after the close of the polls by 4:00pm.

Copies of the Election Code are available at http://www.4cd.edu/gb/policies_procedures/student/S3029.pdf or upon request.