

# 2025 Session Legislative Page Application



Preferred deadline: **Friday, October 4, 2024.**

**Final** deadline for all applications - postmarked on or before: **Friday, October 18, 2024.**

*Supervision of pages by the Legislative Research Council is limited to the actual performance of assigned duties within the Capitol complex. The Legislative Research Council is not responsible for any activity that is not directly work-related.*

*Please print clearly.*

**NAME:** \_\_\_\_\_  
(First) (MI) (Last)

**MAILING ADDRESS:** \_\_\_\_\_  
(Street or P.O. Box)

\_\_\_\_\_  
(City) (Zip Code) (Include Area Code)

**CELL PHONE:** \_\_\_\_\_  
(Include Area Code)

**PARENT/GUARDIAN:** \_\_\_\_\_ **CELL PHONE:** \_\_\_\_\_  
(Include Area Code)

**PREFERRED E-MAIL ADDRESS:** \_\_\_\_\_

**PRINT YOUR NAME (FIRST & LAST) EXACTLY AS YOU WANT IT TO APPEAR ON YOUR NAMETAG:**

Have you previously served as a page? Yes  No  Gender: \_\_\_\_\_  
(For housing and shirts)

**NAME OF HIGH SCHOOL:** \_\_\_\_\_

**GPA:** \_\_\_\_\_  
(At least 3.0 encouraged)

**Junior**  **Senior**   
(Seniors will be given preference)

**Attach a cover letter with your application telling us about yourself, describing why you are interested in serving as a legislative page, and specifying why you should be selected to serve.**

List your recent or current extracurricular activities, such as Boys/Girls State, Debate, Sports, Music, etc.: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**PLEASE SPECIFY YOUR FIRST, SECOND, THIRD, FOURTH, AND FIFTH PREFERENCES FOR THE TIME FRAME IN WHICH YOU WOULD LIKE TO SERVE. ALSO, INDICATE IF YOU CANNOT SERVE A PARTICULAR TERM.** *NOTE: Dates of terms are subject to change. The last day of the fifth term may be long, so you should plan to stay in Pierre on that Thursday night, if necessary.*

TERM	DATES OF SERVICE <small>(Approximate)</small>	PREFERENCE <small>(Indicate 1<sup>st</sup>-5<sup>th</sup> choice)</small>	CANNOT SERVE <b>THIS TERM</b> ✓
1 <sup>st</sup> Term	January 13 through January 24		
2 <sup>nd</sup> Term	January 27 through February 7		
3 <sup>rd</sup> Term	February 10 through February 21		
4 <sup>th</sup> Term	February 24 through March 6		
5 <sup>th</sup> Term	March 10 through March 13		

If selected to serve, would you need the page advisor to arrange housing for you? Yes  No

**THREE SIGNATURES OF APPROVAL ARE REQUIRED ON EACH APPLICATION: YOUR SCHOOL, A SPONSORING LEGISLATOR OR LEGISLATOR-ELECT, and YOUR PARENT or GUARDIAN. *If chosen to serve, the Chamber in which you serve will be assigned according to the Chamber in which your sponsor serves.***

**SCHOOL (PRINCIPAL OR SUPERINTENDENT)**

*I, the undersigned School Principal or Superintendent, do hereby give permission for this applicant to serve as a Legislative Page during the next session of the Legislature.*

\_\_\_\_\_  
School Principal or Superintendent **Printed Name**

\_\_\_\_\_  
Title

➔ \_\_\_\_\_  
**Principal or Superintendent Signature**

\_\_\_\_\_  
Date

**LEGISLATOR OR LEGISLATOR-ELECT**

*I, the undersigned Member or Member-Elect of the South Dakota Legislature do hereby sponsor and recommend this applicant for service as a Legislative Page during the next session of the Legislature.*

\_\_\_\_\_  
Member or Member-Elect, South Dakota Legislature **Printed Name**

District: \_\_\_\_\_

➔ \_\_\_\_\_  
**Member or Member-Elect, South Dakota Legislature Signature**

\_\_\_\_\_  
Date

**PARENT OR GUARDIAN**

*I (we), as parent(s) or guardian(s) of this applicant, grant permission for the applicant's participation, if selected, in the Legislative Page Program.*

➔ \_\_\_\_\_  
Parent or Guardian **Printed Name**

\_\_\_\_\_  
**Parent or Guardian Signature**

\_\_\_\_\_  
Date

**PLEASE ATTACH AT LEAST TWO LETTERS OF RECOMMENDATION. (Letters may be sent directly to the PAGE ADVISOR at the address listed below.)**

REFERENCE NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

REFERENCE NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

**How did you hear about the Page Program?** Government Teacher \_\_\_ Guidance Counselor \_\_\_ Other School Personnel \_\_\_ Parent \_\_\_

LRC Website/Facebook \_\_\_ Legislator \_\_\_ Former Page \_\_\_ Other, please list \_\_\_\_\_

**REMEMBER....**

**COMPLETE AND SEND ALL ITEMS REQUESTED ON THIS APPLICATION. IF ANY REQUESTED INFORMATION IS MISSING, PROVIDE WRITTEN EXPLANATION WITH APPLICATION.**

**Please return application to:**

Page Advisor  
Legislative Research Council  
500 East Capitol

Pierre, South Dakota 57501-5070

Phone: 605-773-3251 – Fax: 605-773-4576 – Email: PageProgram@sdlegislature.gov

**Page Program Information:** [SDLegislature.gov/PageProgram](http://SDLegislature.gov/PageProgram)