



STATE OFFICER APPLICATION

2011-2012 TERM
APPOINTED OFFICER

Date: _____

Name	_____	Nickname	_____
Address	_____	Home Phone	_____
	_____	Cell Phone	_____
E-Mail Address	_____	Age	_____
		Birth Date	_____
Chapter	_____	Initiation Date	_____

I would like to be considered for State Appointed Office: YES NO
 Check which office(s) you would like to be considered for: DMC Chap. Mar. Other

Chapter Offices Held: _____

Have you attended Keyman or LTC? YES NO
 If yes, what year/s and conference(s)? _____

State Offices Held: _____

Circle all that you have completed or achieved:
 LCC1 LCC2 LCC3 LCC4 LCC5 RD FMA BHK CHEV
 PMC-MSA

List all DeMolay ritual parts that you know:

List any Installation parts that you know:

Please list your current education level and what school you attend:

Please list any other groups of which you are a member and offices held: _____



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Do you have your driver's license? YES NO

If not, do you have someone able to provide you with a ride to most DeMolay events? YES NO

Basic Expectations

- I will be available to attend state and district events.
- I will be able to travel to at least one other chapter meeting a month that is not my home chapter. If I am applying as a District Master Councilor, I will attend at least two other chapter meetings a month that are not at my home chapter.
- I will try to perform all duties that are assigned to me by the State Master Councilor to the best of my abilities, and realize that everyone is working towards the goal of bettering New Jersey DeMolay. I also acknowledge that additional duties may appear as the year progresses that will require my efforts.
- I will promptly respond to all communication within an appropriate amount of time including, but not limited to phone calls, e-mails, text messages, and snail mail.
- I will in the event I cannot attend an event or perform a commitment, give advance notice to the State Master Councilor and will communicate with him as to the reasons why. I realize that communication is a part of my duties as a State Officer.
- I realize that I must balance my commitments in DeMolay and outside of DeMolay to the best of my abilities. I realize that I serve at the discretion of the State Master Councilor, who serves at discretion of the members of New Jersey DeMolay.

Do you agree to the following expectations? YES NO

Authorization

Applicant Signature

Parent or Guardian Signature

Chapter Signature

Please send your completed form to: "Dad" Raymond Flynn, 207 Stokes Avenue, Hainesport, NJ 08036

All forms must be postmarked no later than May 15, 2011