



Nebraska Legislature

Application for Page

Your State Senator _____

Legislative District Number _____

PLEASE PRINT OR TYPE

				Date
Name (Last, First, Middle Initial)	Email Address			Cell Phone
Address (School Term)	Apt./Room #	City	State	Zip Code
Home Address	Apt./Room #	City	State	Zip Code

Education

Name of High School	
Name of College	FR. <input type="checkbox"/> SO. <input type="checkbox"/> JR. <input type="checkbox"/> SR. <input type="checkbox"/> <small>(Class standing as of January 1 of next year)</small>
Current Grade Point Average	

Experience *(begin with most recent position and include volunteer work)* **Have you applied to be a Page in the past?** No Yes

References *(other than relatives)*

Name	Address	City	State	Zip Code
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Remarks

You are encouraged to include a resumé and a letter of recommendation from your State Senator.

If you anticipate having a different address or phone number by September, please notify the Clerk of the Legislature's Office (402) 471-2271 with this change. Applicants who cannot be reached at the address or phone number on their application will not be eligible for consideration.