



AMERICAN LEGION AUXILIARY
MARYLAND GIRLS STATE 2023

INTERVIEWS

Date: April 21

Time: 7 – 8 PM

Gold Star Post 191

Prospect Road

MT. Airy MD 21771

Point of Contact/RSVP to:

Janet Morris

301-928-7968

Americanism191@gmail.com



American Legion Auxiliary
Maryland
Girls State

APPLICATION

Steps to Apply:

Step 1: Fill out and submit the **ONLINE Interest Form (Required)**.

Step 2: **Print** and fill out application **(Required)**

Step 3: Scan and Email your completed application to alamdgs@gmail.com. Subject: ALA MD Girls State Application YOUR NAME. **Please note:** Once your application is reviewed, you will be matched with a sponsoring unit.

Step 4: Sponsoring unit will notify you if selected. Please email alamdgs@gmail.com if you have not received a notification by April 30, 2022.

Step 5: All those selected, must attend a **mandatory** orientation session. Dates will be listed on our website and Facebook page.

PLEASE TYPE OR PRINT USING YOUR LEGAL NAME AND MAILING ADDRESS

FIRST NAME: _____ LAST NAME: _____

Address: _____

Date of Birth: _____ Age: _____ Graduation Date (Mo./Yr.): _____ Country of Citizenship: _____

Phone #: _____ Email (*write clearly*): _____

SCHOOL CERTIFICATION

We recommend this student of the **Junior Class** as a candidate for the American Legion Auxiliary Maryland Girls State program. We believe she has the qualifications of character, integrity, leadership, intelligence, and interest that would allow her to be a successful participant in the program.

SCHOOL NAME: _____ PHONE: _____

COUNSELOR'S PRINTED NAME: _____

COUNSELOR'S SIGNATURE: _____ DATE: _____

Please note: a letter of recommendation can also be emailed to alamdgs@gmail.com with subject line ALA MD GS Letter of Recommendation STUDENT'S NAME. Check here if letter emailed

APPLICANT'S CERTIFICATION

If selected, I voluntarily pledge to **obey all the rules and respect the judgment of staff and counselors. I will take an active part in the activities voluntarily or under assignment. I pledge to attend the entire full week of ALA Maryland Girls State.**

SIGNED: (Applicant) _____

Agreement of Parent/Guardian: I hereby give my consent for the applicant to attend the ALA Maryland Girls State program. I understand that attendance for the entire full week of the program, including graduation, is a requirement for receipt of the ALA Maryland Girls State Certificate of Participation.

SIGNED: (Parent/Guardian) _____

Interest Form Submitted Online and Application Emailed on or before April 30, 2022

alamdgs@gmail.com * www.facebook.com/alamdgs



American Legion Auxiliary
Maryland
Girls State

QUESTIONNAIRE

1. ARE YOU INTERESTED IN GOVERNMENT AND CITIZENSHIP?
2. SUBJECTS/GRADES (1st semester Junior/Senior year):
3. AWARDS - EITHER SCHOOL OR CIVIC:
4. CAREER GOAL(S) IF DETERMINED (or those from which you might choose):
5. LIST ANY MEMBERSHIPS IN STUDENT GOVERNMENT, LEADERSHIP PROGRAMS, AND MILITARY ORGANIZATIONS DURING YOUR HIGH SCHOOL CAREER. INDICATE OFFICES & CHAIRMANSHIPS, IF ANY:
6. REASON FOR WISHING TO ATTEND ALA MD GIRLS STATE (50 words or less):



American Legion Auxiliary
Maryland
Girls State

ORIENTATION AGREEMENT

I understand that to be eligible to attend ALA Maryland Girls State **I must participate in one of the scheduled mandatory orientation sessions.**

ALA Maryland Girls State Applicant:

Print Name: _____

Signature: _____

I understand my daughter **must attend a mandatory orientation session** to be eligible to attend ALA Maryland Girls State.

Parent/Guardian:

Print Name: _____

Signature: _____

If interviewed and selected, we will attend the orientation scheduled for

Date & Time

*** If you HAVE NOT BEEN CONTACTED by a sponsoring unit by April 30, 2022, please contact the ALA MD Girls State Director immediately at alamdgs@gmail.com**

All orientation dates and times will be posted on our Facebook page on or before February 10, 2022.

www.facebook.com/alamdgs



American Legion Auxiliary
Maryland
Girls State

WAIVER

NO APPLICATION WILL BE ACCEPTED WITHOUT THIS WAIVER

As the undersigned parent/s or guardian/s of _____, a registered student at _____ High School, I do hereby state that in consideration of the instructions to be given to her and the training program she is to be involved in, I, as her parent or guardian, do hereby grant and consent that my daughter or ward may participate in all the planned activities of American Legion Auxiliary Maryland Girls State.

I also, as the parent or guardian of the above named, do hereby fully release, exonerate, discharge and hold harmless the American Legion Auxiliary, Department of Maryland, its individual officers, agents, instructors, and employees from any and all claims and demands, suits, actions or causes of action, either in law or equity, which I as parent or guardian, may have by reason of any illness, injury or accident incurred or suffered by my daughter or ward, _____, while she is in attendance at said Girls State no matter how such injury, illness or accident may have been caused or occasioned.

Does your daughter/ward have any physical or emotional condition of which Girls State should be aware? Yes ____ No ____ . If yes, please explain what the condition is and whether it is being treated by a physician.

1. () Disability (*Explain*): _____
2. () Using Prescribed Medication(s) _____
3. () Eating Disorder(s) _____
4. () Allergies _____
5. () Interpreter _____

PARENT/GUARDIAN

DATE

PARENT/GUARDIAN
DATE