

## Candidate Fact Sheet

### 2010-2011 Miss South St. Paul Scholarship Program

The Candidate Fact Sheet will be used for judging, publicity, and invite purposes.

Deadline for **TYPED** applications is Wednesday, May 12, 2010

(Please submit a head-shot photo with this form)

#### **General Information:**

Name: (As you would like it to be publicized)

Address:

Phone:

E-mail Address:

Date of Birth:

Age:

Parent's Name: \_\_\_\_\_ Parent's Name: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Phone: \_\_\_\_\_

Emergency Contact: Phone – Daytime/Phone-Evening: \_\_\_\_\_

#### **Academic History – High School**

High School Attended: \_\_\_\_\_

Please list any academic honors or awards received in high school.

High School Activities (including musical groups, sports groups, student gov. etc.)

#### **Academic History – College** (fill out if applicable)

College Attended: Include Major(s)

Academic Honors, Scholarships or Awards:

#### **Volunteer Activities:**

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### 2010-2011 Miss South St. Paul Scholarship Program

Interesting Facts about Yourself: \_\_\_\_\_

\_\_\_\_\_

Hobbies: \_\_\_\_\_

\_\_\_\_\_

Career Goals: \_\_\_\_\_

\_\_\_\_\_

Place of Employment: \_\_\_\_\_ Position: \_\_\_\_\_

\_\_\_\_\_

#### Question and Answer:

1. I value \_\_\_\_\_ the most because: \_\_\_\_\_

2. The three words that best describe me: \_\_\_\_\_

3. To me, commitment means: \_\_\_\_\_

4. What is the most challenging event you have faced? Explain. \_\_\_\_\_

\_\_\_\_\_

5. What one challenge do you find women face in today's society? \_\_\_\_\_

6. I would like to be a South St. Paul Ambassador because..... \_\_\_\_\_

\_\_\_\_\_

7. The three volunteer service projects that I will be promoting as a South St. Paul Ambassador is:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

**Candidate Fact Sheet Agreement**  
2010-2011 Miss South St. Paul Scholarship Program

*PLEASE READ THE FOLLOWING INFORMATION AND SIGN:*

In submitting this application, I agree to:

1. Attend the activities planned for the candidates prior to and during the Kaposia Days celebration;
2. Follow all guidelines and responsibilities as set forth by the Kaposia Days Royalty Committee, and;
3. Represent my sponsor in a conscientious and dependable manner.

If selected as Miss South St. Paul or South St. Paul Princess, I agree that I will abide by the South St. Paul Royalty Policies (the current version of which is set forth on an attachment to this agreement), and that if I fail to do so, I may be removed as a member of Royalty and replaced.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
Candidate's Signature

In addition, as parent(s) or guardian(s) of the above-named candidate, I (we) agree that if my (our) daughter becomes an Ambassador for South St. Paul, I (we) understand that we will be called on to assist with chaperoning and transportation duties. I (we) accept these responsibilities in support of our daughter.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Please return application, head shot photo, and \$30.00 check for applications fee by Wednesday, May 12, 2010, to:

Carlene Johnson, Queen Candidate Chair  
South St. Paul Kaposia Days Festival  
214 W. Douglas Street  
South St. Paul, MN 55075  
(651) 492-3391  
ssproyalty@gmail.com

**Event Waiver of Liability**  
2010-2011 Miss South St. Paul Scholarship Program

The undersigned hereby releases and holds harmless South St. Paul Kaposia Days, Inc. and its directors and volunteers from **all liability** rising from its sponsorship and my participation in any activity relating to my candidacy in the South St. Paul Kaposia Days, Miss South St. Paul Royalty Events beginning May 2010 and ending with the termination of my participation. All references to participation in the South St. Paul Kaposia Days, Miss South St. Paul Event(s) include any activity in which I participate as part of my candidacy or as royalty representatives, whether supervised or unsupervised, chaperoned or not chaperoned.

By signing this Waiver of Liability, I certify that I understand there may be risks of injury as a result of my participation. I agree to assume responsibility for those risks. I realize that as part of my voluntary participation, I can decline to participate in any portion of this Event(s). I specifically waive and release South St. Paul Kaposia Days, Inc. and its directors and volunteers from all liability arising from any injury which I sustain as a result of my participation in South St. Paul Kaposia Days, Miss South St. Paul Royalty Events.

In addition, I specifically waive and release South St. Paul Kaposia Days, Inc. and its directors and volunteers from all liability from damage to my personal property as a result of my participation in South St. Paul Kaposia Days, Miss South St. Paul Royalty Events.

I hereby certify that I am 18 years of age or older. If I have not reached my 18<sup>th</sup> birthday, my age is \_\_\_\_\_, and my parent or guardian has signed this waiver.

Dated: \_\_\_\_\_, 2010

\_\_\_\_\_  
Signature of Participant

\_\_\_\_\_  
Signature of Parent or Guardian  
(Required only if Participant is less than 18 years of age.)