



ELIGIBILITY AFFIDAVIT

Candidate Name: _____

Local Competition: _____

Date of Local Competition: _____

1. Eligibility.

A. Age: I am currently _____ years of age. My birthdate is _____.

- Must be at least thirteen (13) years of age on the first day of the State Competition;
- Must not be older than seventeen (17) years of age as of July 31 in the calendar year of the State Competition, unless you are 18 years old and have not graduated from high school as of July 31 of the same calendar year.

B. Residency: I currently reside at _____
_____. I have resided at this address since _____ (date).

If my residency at this location has been less than six (6) months preceding this Local Competition, my previous residence was _____
_____. I lived at that residence from _____ (date) to _____ (date).

C. Educational Status: I am currently enrolled at _____
_____ in the city of _____, state of _____
_____. As of the date of this Local Competition, I have successfully completed at least one semester as a full-time student and am presently attending classes in accredited courses and am considered a full-time student by the school that I attend. OR I am currently home schooled in the city of _____, state of _____. I rank in the _____ grade according to my home school certification.

D. Citizenship: I am a citizen of the United States of America.

E. Gender: I am female.

F. Marital Status: I am not now and have never been married.

G. Parental Status: I am not now pregnant and have never been pregnant. I am not the adoptive parent of any child.

H. Good Character: I am of good moral character and I have not been involved at any time in any act of moral turpitude.

I. Criminal Record: I have never been convicted of any criminal offense and there are no criminal charges or investigations pending against me.

J. Health: I am in good health and can, to the best of my knowledge, participate fully in any program activities without any outside assistance.

K. Substance Abuse: I do not use or consume any illegal, controlled or dangerous substances or abuse the use of alcohol or other dangerous substances.

2. Prior Competition Commitments.

- A. At the time of my present participation in a MAOTeen Local Competition, I do not hold a local, state, national, or international title of any other national or international competition of a similar nature* to the MAOTeen program.
- B. If do hold a title, I understand I must resign that title by midnight of the day prior to the first day of the MAOTeen Local Competition. I will provide written confirmation, from an official of the organization, that they have accepted my resignation and I am under no further obligation to the organization (see attached affidavit).

3. Other Competitions.

- A. I agree that during my year of service, I will not become a Candidate or participant in any other national or international competition, or preliminary competition thereto, of a similar nature* to the MAOTeen program.

*Similar Nature is defined as programs with similar structure to the MAOTeen program where the Candidate advances through winning a local and/or state competition to advance to a national and/or international competition. This does not include fair/festival or school titles **that do not select a national winner.**

I have read and understand the provisions of the Eligibility Affidavit. To the best of my knowledge, all of the factual statements made in this Affidavit are true and accurate. If requested by the Local/State Organization, I will provide any documentation necessary to substantiate any or all information provided.

Candidate Signature

Date

Parent/Guardian (Print Name)

Relationship to Candidate

Parent/Guardian Signature

Date

(This form may be emailed to the Local Director – the original is not required.)



AFFIDAVIT OF RESIGNATION OF TITLE

(this affidavit does not have to be use as the means of written notification)

I, _____, acting as _____ (*Director, President, Chairman, etc*) of the _____ competition, do hereby affirm that _____ (*Candidate name*) has resigned her title of _____ and has no further obligation to the _____ organization.

Organization Official (Print Name)

Email Address

Telephone Number

Organization Official (Signature)

Date

(This form may be emailed to the Local Director – the original is not required.)