



## 2026 Application for Elected State Office

**Submission Deadline:** April 30, 2026. Submit completed applications to the State Chapter Advisor.

### Qualifications:

- SMC Candidates - must have served as Deputy State Master Councilor during the current term.
- Age Requirements by Conclave – DSMC – be at least 18 years old or a high school graduate. SSC, SJC, and Scribe – Be at least 16 years old by Friday morning of Conclave.
- DSMC, SSC, and SJC candidates must have served as Master Councilor, completed the Representative DeMolay Award, earned the Lamp of Knowledge, and hold an Obligation Card.
- Candidates must have previously served as an Elected State Officer, or Appointed Officer.
- Must have served as a Youth Director or Assistant Youth Director.
- Must demonstrate independent travel capability with parental support. Parental signature of application is required.
- Previous attendance at a DeMolay Leadership Camp is mandatory.

### Election Process:

- DSMC, SSC, and SJC positions may follow a drop-down election process; State Scribe and State Master Councilor are excluded.
- Candidates not elected may choose to run for another office or withdraw at any time with meeting the state office requirements.

### Application Sections:

#### Step 1: Applicant Personal Information

- **Personal Information:** Last Name, First Name, Member ID, Home Chapter, Year Joined, Age, Grade, MC Term Years, Appointed Officer Terms, Address, City & Zip, Home Phone, Cell Phone.
- **Honors/Awards:** Indicate all applicable honors and awards.
- **Office Selection:** Select the State Office for which you are applying.

<b>Last Name</b>		<b>First Name</b>			<b>Member ID</b>
<b>Address</b>		<b>City &amp; Zip</b>		<b>Home Phone</b>	<b>Cell Phone</b>
<b>Home Chapter</b>	<b>Age</b>	<b>Grade</b>	<b>MC Term Year(s)</b>	<b>Appointed Officer Term(s)</b>	

**I hold the following honors/awards (check all that apply):**

- Obligation Card       Rep. DeMolay (RD)       PMC-MSA       Lamp of  
 Blue Honor Key       Founders Mbr       Chevalier       DeMolay of the  
 Legion of Merit       Ambassador Award

**I am running for the following State Office\* : (check one)**

- State Master Councilor       Deputy State Master       State Senior Councilor  
 State Junior Councilor       State Scribe

**Step 2: Letter of Intent**

Submit a typed letter including:

- Name
- Chapter
- Office Applying for
- Qualifications
- Goals as a State Officer. Sign and attach this letter to your application.

**Step 3: Secure Nominator and Second**

Obtain physical signatures from two DeMolays:

- The nominator must not be from your home chapter and will speak on your behalf at Conclave.
- Any DeMolay may second your nomination.

	DeMolay Name	Home Chapter	Signature
<b>NOMINATED BY:</b>			
<b>SECOND BY:</b>			

### Step 3: Duties & Responsibilities

Elected State Officers are expected to:

- Represent Illinois DeMolay at all activities and online.
- Attend all State Staff, Officer Meetings, and State events.
- Serve as Youth Director for one State event.
- Learn to memory the ritual of your office.
- Assist with Chapter Installation Ceremonies as requested.
- Attend monthly meetings for your home chapter and visit assigned chapters regularly.
- Maintain contact with Master Councilors of assigned chapters.
- Submit reports upon request and reimbursement requests promptly.
- Serve at the discretion of the Executive Officer.

**Acknowledgement:** Signing the application is acceptance of duties, responsibilities, and financial obligations.

**Signatures Required:** Nominee, Parent/Guardian, Chapter Advisor.

### Parental / Legal Guardian acknowledgement

Required per applicant, and by signing, the parent/guardian affirms:

- The applicant will have access to a reliable, insured vehicle and cell phone for term duties.
- Support for unplanned travel and event attendance.
- Commitment to maintaining educational standards (passing grades and appropriate school conduct).
- Understanding that failure of state officer to attend required events may result in disciplinary action.

### Required Signatures:

Nominee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Chapter Advisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Submission:** Mail or email by April 30th to Dad David Capes, 410 Birch Ave, Genoa, IL 60135-8181, or scan and email to [d.capes@ildemolay.org](mailto:d.capes@ildemolay.org).