

Application for Student Aide Position

Please return completed application to a counselor.

Student Name: _____

Applying to be an aide for team:

___ 7A	___ 7D	___ 8B	Teacher _____
___ 7B	___ 7/8A	___ 8C	Teacher _____
___ 7C	___ 8A	___ 8D	Teacher _____

Why do you want to be an Aide?

What responsibilities do you think a student aide will have at Santan?

What qualities do you possess that will assist you in being a good aide?

Any other information about yourself you feel it is important for us to know?

Student Signature: _____ Date: _____

Parent Signature: _____ Date: _____