Santan Jr. High Student Council Application

Thank you for taking interest in the Santan Student Council. This council has worked hard over the past few years to establish itself as one of the top junior high student councils in the state of Arizona. We look forward this year in continuing with this wonderful tradition.

<u>Timeline</u>

January/February 2019 – Elementary registration for 7th grade

SJHS Student Council Application Packets are online on the Santan Jr High webpage

Wednesday, February 13, 2019 – Last day for students to turn in the completed application packet and teacher recommendations

- The completed application packet and <u>3</u> teacher recommendations be must be turned into Kathy Mejia at Santan Junior High no later than <u>Wednesday, February 13, 2019.</u>
- **NO extensions will be given!!** Please remind your teachers to turn in your recommendations to Kathy Mejia at Santan Junior High School through District mail.
- ALL PARTS OF THE APPLICATION PACKET (QUESTIONS, PARENT PERMISSION, TEACHER RECOMMENDATIONS) MUST BE SUBMITTED IN ORDER TO BE IN CONSIDERATION

Spring Intersession – Over spring break SJHS student council advisors will review the application packets and select incoming 7th graders for the 2019-2020 student council. **PLEASE NOTE**: Not all applicants will be chosen due to limits on the number of students we can keep for the elective class.

Monday, April 2nd: Students will be contacted and informed of council selections.

If you have any questions, please feel free to contact us.

Advisor: Kathy Mejia <u>mejia.kathy@cusd80.com</u>

Parent/Guardian Permission Form

Parent/Guardian <u>AND</u> Student Candidate must complete and sign. <u>Due by Wednesday, February 13, 2019</u>

Student Name (print) ______

I have read through the entire packet and understand all of the requirements and guidelines for student council members. I also understand that occasionally I will need to attend after school activities/meetings and time out of class. Any missed schoolwork due to student council activities is the responsibility of the student.

I give my son/daughter permission to run for student council for the 2018-2019 school-year and agree to all the above terms if my child is selected. **Packets are due by Wednesday, February 13, 2019.**

Student Name (print)	Student Signature	Date
Parent Name (print)	Parent Signature	Date
Mailing address		
Parent/Guardian Phone		
Parent/Guardian Email		

Application Questions Due by Wednesday, February 13, 2019

Please print neatly in <u>blue</u> or <u>black</u> ink. If you need additional room, use the back of this form or attach another page.

1. What qualities do you have that would make you a good Student Council member?

2. What is your vision for how Student Council should contribute to Santan Junior High?

3. Have you ever been involved in student council or any other types of leadership programs? If yes, please explain.

Teacher Recommendation Form

Name of Student _____

To determine eligibility for student council membership, students have been asked to have a teacher complete a recommendation form. Please give the student an honest rating to be sure that we have a positive and productive year. Please do not return this form to the student, but please return to **Kathy Mejia at Santan Junior High by Wednesday, February 13, 2019**.

Thank you for your help. Please complete the following in ink.

Name of Class/Teacher Name _____

Current Grade (approximation is fine) _____

Has this student maintained a positive and helpful attitude in your class? Explain

Do you think that this student can maintain good organizational skills necessary to maintain their grade?

On a scale of 1-5, please rate the applicant in each of the areas listed below: 1 - Poor 5 - Excellent

- ____ Positive peer relations
- Cooperation
- ____ Attendance and punctuality
- ____ Ability to work in a group

- ____ Overall attitude ____ Citizenship
- ____ Dependability
- Organization
- ____ Maintains a positive/helpful behavior in class

Teacher Name (print)

Teacher Signature

Date

Additional Comments:

Teacher Recommendation Form

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Teacher Name (print)

Teacher Signature

Date

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