

Application for Student Aide Position

Please return completed application to a counselor.

Student Name: _____

Applying to be an aide for team:

| | | | |
|---------|-----------|---------|----------------|
| ____ 7A | ____ 7/8A | ____ 8A | Teacher: _____ |
| ____ 7B | ____ 7/8E | ____ 8B | Teacher: _____ |
| ____ 7C | | ____ 8C | Teacher: _____ |
| ____ 7D | | ____ 8D | |

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: _____