

## Salina Intermediate Student Council Application 2017 – 2018

Name \_\_\_\_\_ Grade \_\_\_\_\_ 1<sup>st</sup> Hour Teacher \_\_\_\_\_

**Circle the position for which you are running:**

**PRESIDENT**  
8<sup>th</sup>

**VICE PRESIDENT**  
7<sup>th</sup>

**SECRETARY**  
6<sup>th</sup>

**GENERAL MEMBER**  
6<sup>th</sup>, 7<sup>th</sup>, 8<sup>th</sup>

**Explain why you would be a good Student Council member:**

On a separate sheet of paper, answer the following questions and attach it to this application:

1. Why do you want to be on student council?
2. What are your qualifications?
3. What personality traits do you have that will make you a good leader?
4. What goals or ideas have you accomplished in the past?

**Applicants who fail to answer these questions will not be considered a candidate.**

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You will need to have a parent and 2 core teacher recommendation signatures.

My child can attend student council meetings before/afterschool during the school year.

Parent Signature \_\_\_\_\_

**Recommendations:**

I recommend \_\_\_\_\_ for student council.

Teacher Signature \_\_\_\_\_

Teacher Signature \_\_\_\_\_

\_\_\_\_\_

Signature of Applicant

\_\_\_\_\_

Date

**Please turn in completed application to Mrs. Rajaa Zahr in the main office by Wednesday, October 18th.**