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## TEACHER REFERENCE

List the name of a teacher that would be willing to be a reference for you. We will then be in contact with that teacher.

Teacher name \_\_\_\_\_

## STUDENT

I understand that student council is a yearlong commitment. I will be present at all of the meetings when at school. I will be an active member and am willing to serve on different committees throughout the year. I will have to miss class on occasion and it is my duty to let my homeroom teacher know and make up any missed assignments.

Student Signature: \_\_\_\_\_ Student  
Name \_\_\_\_\_

Student Grade \_\_\_\_\_

I understand and support my child's decision to apply for a Student Council position.

Parent signature \_\_\_\_\_