## Student Council Representative Nomination Application

Fill out completely and return to Mrs. Trannon by Friday, September 9. Final selections will be announced on Monday, September 12. Application will NOT be accepted without signatures from a parent and one staff member recommending you.

Name		Grade				
Supervised Study Teacher		Are you in band, chorus, or or			stra?	
,	ny you want to be in					
	lities you have that r	nake you a good (	candidate			
What ideas do y				`you don't have any yet.		
Circle all the act	ivities you would like	to be part of plar	nning and	running		
spirit weeks	Making posters	Making videos	Plan	ting flowers		
school store	dodgeball tournar	ment 8th grad	de gala	candygrams		
You must have (	DNE parent signature	and ONE teache	r signatur	re to apply for student c	ouncil.	
Yes, I give permi: will take place of by joining the Re	ne Thursday a month	participate in stu n at 7:30am in roo	ident cour om 236. –	ncil. I understand that m To get updates on meetii	neetings ng times	
Send a text to 81010		Text this message: @be993e9				
Parent Signature			Email			
Teacher Signatu	re:					