**Glenwood Middle School**

**Student Council Application**

**2016-2017**

Student Council members are students who serve as leaders at Glenwood Middle School in a variety of ways.

I understand that as a Student Council member I am expected to:

* Serve as a role model
* Assist other students
* Follow school rules
* Honor my commitment to serve on the council for the entire school year

All students applying will be a part of the Student Council General Assembly. The General Assembly will meet once a quarter during the school day.

All students will be required to join at least **1** subcommittee. Subcommittees will meet on a more consistent basis (1-2 times a month) and meetings could take place after school.

Available subcommittees:

* Executive Board
* Student Ambassadors
* School Spirit
* 8th Grade Activities
* Leo’s Club

\*See attached student council framework for more detailed information on each subcommittees.

**Complete the following application and return to your homeroom teacher by Friday, September 23rd**

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

Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. List 3 qualities you think makes a good leader.

2. What ideas do you have for the Student Council? (use back, if needed)

3. How do you think Student Council can benefit our school?

4. Subcommittee Choices

All students are required to join at least 1 subcommittee. Rank your interest for each subcommittee from 1 - 5 (1 being your first choice). We will do our best to honor your first or second choice.

\_\_\_\_\_\_\_\_\_ Executive Committee

\_\_\_\_\_\_\_\_\_ School Spirit

\_\_\_\_\_\_\_\_\_ Student Ambassadors

\_\_\_\_\_\_\_\_\_ 8th grade Activities

\_\_\_\_\_\_\_\_\_ Leo’s Club

5. Would you like to be part of more than one subcommittee?

Circle: YES or NO

Student Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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