



## Student Council Application

Student Council Members are students who are elected to serve as leaders at O.L. Smith Middle School in a variety of ways. Once elected to the Student Council, members will meet once a month as a whole council to discuss ideas and opportunities for O.L. Smith.

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

Grade: \_\_\_\_\_ A Square Teacher: \_\_\_\_\_

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

- Be an Upstander at all times and serve as a positive role model
- Complete all class assignments
- Maintain satisfactory grades
- Assist teachers and other students
- Follow school rules
- Honor my commitment to serve as a Student Council Member for the entire school year

I understand that I may be placed on probation or removed for failing to maintain my commitment or acting in a manner that is not consistent with the above expectations. I know that a conference with Mrs. Rivait will be conducted if this becomes necessary. I know I can come to Mrs. Rivait with any questions or problems at any time.

If elected I hereby agree to conduct myself in an appropriate manor as a Student Council Member. I will take an active part in Student Council. I will follow all expectations and rules for being on Student Council.

Select a position you are planning on running for:

- President \_\_\_\_\_
- Vice President \_\_\_\_\_
- Secretary \_\_\_\_\_
- Treasurer \_\_\_\_\_

- Class Delegate (there will be 2 per grade level)\_\_\_\_\_

By signing below, I understand that I am agreeing to have my student participate in the student council election. If elected, s/he will attend monthly meetings starting at 3:00 p.m. on Tuesdays. Some months may require more.

Name\_\_\_\_\_

A Square Teacher\_\_\_\_\_

Grade\_\_\_\_\_

**Essay-Please Explain:** (you may attach another piece of paper)

1. Why do you want to be a Student Council Officer or Delegate?
2. What qualities do you have that will make you a successful Student Council Officer/Delegate?
3. What ideas do you have for the Student Council? (Attach everything to your application.)

Please return to Mrs. Rivait in the counseling office by: Friday, September 15<sup>th</sup> on or before 2:55. \*Late Applications will not be accepted!!!

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

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

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

