

Senior Advisory Board – Class of 2024—Member Application

All seniors during the 2023-2024 school year who meet the following criteria are eligible to be members of the Senior Advisory Board. Below are the expectations of the board members:

1. Board members will maintain a 2.5 GPA.
2. Board members will attend meetings regularly unless excused beforehand by Mrs. Rouse.
3. All meetings will begin at 2:30pm, location room 605. Planned meeting dates will take place one Wednesday per month (first meeting TBD).
4. Board members will act as **ambassadors** of the Senior Class. They will **collect feedback and information** from classmates about issues important to the Class of 2024. Board members will act as **positive role models** for their classmates and underclassmen.
5. Board members will participate in **class social and service activities** as well as **fundraising** (if necessary) and they will encourage participation by other classmates. They will **promote a sense of unity and spirit** throughout their class.
6. Board members will **plan, organize, prepare, and promote class events and Graduation.**

****Senior Advisory Board Officers will be selected by administration and SAB members.**

The application, **along** with two teacher recommendations, must be filled out and turned in to **Mrs. Rouse in room 605 by 3:00 pm on Friday, 4/27/23**. It is the student's responsibility to follow up with teacher recommendations and see that they are all turned in to Mrs. Rouse's mailbox by the above date.

Please fill in the information required below, sign and return the form and the signature sheet to Mrs. Rouse in room 605 by Friday, 4/27, 2023

Name: _____

HomePhone: _____

Address: _____

E-mail: _____ Student Cell Phone: _____

GPA: _____ (2.5 minimum)

Any referrals in past year? (circle one) Y / N If yes, please explain:

Dean of Discipline Signature: _____

We have read, understand, and agree to the above terms:

Student signature: _____

Parent Signature: _____

Senior Advisory Board – Class of 2024 Teacher Recommendation

Please Do Not Return This Recommendation to the Student

Teachers: Please complete this recommendation for _____ to become a member of the Senior Advisory Board. Upon completion, please return this form to the mailbox of Mrs. Rouse by Friday, September 1, 2023

Teacher Name: _____

Please rate the student from 1 to 5 on each of the following, 1 being the lowest, 5 being the highest:

Academics	1	2	3	4	5
Sociability	1	2	3	4	5
Respectfulness	1	2	3	4	5
Cooperation	1	2	3	4	5
Leadership	1	2	3	4	5

Why would this student be a good representative of the Class of 2024 as a member of the Senior Advisory Board?

Teacher Signature: _____

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Teacher Signature: _____