

Application for Student Representative to the Lake Quinault School Board

Submit the completed application to the LQHS Principal's Office by April , 20 .

Name _____ Cumulative GPA _____

Address _____

Phone _____ Email _____

Please describe your educational and career goals.

On a separate sheet of paper, please explain in 250 words or less why you would like to serve as the student representative to the Lake Quinault Board of Directors.

List two people (at least one teacher) who submitted a letter of reference who could speak on your behalf. Attach the letters of reference.

	<u>Name</u>	<u>Position</u>	<u>Email</u>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

Student Signature _____ Date _____

Parent/Guardian Signature _____ Date _____

ASB Advisor Signature _____ Date _____

Applicant provided a copy of Board Policy/Procedures 1200 ___ Yes ___ No