

Student Council Application Form

Name _____

Form class _____

1. What qualities do you possess which may be useful in the role of a student council member?

2. What previous experiences do you have which may help you as a member of the student council?

3. How do you hope to represent your year group if elected on the student council?

Are you willing to attend meetings during lunchtime? **Yes/No**

Are you willing to attend meetings after school? **Yes/No**

Student Signature

Form Teacher Signature