Student Senate

To the Parent:	
I give my child,	, permission to run for Student Senate for the 2015-2016 academic year. I
	ns, if elected, my child will stay after school until 4:00 on Mondays. It may also require my child
to be available at other tir	nes outside the regularly scheduled time.
Parent Signature:	Date:
To the Student:	
understand this means, if	, am interested in running for student senate for the 2015-2016 academic year. I elected, I will stay after school on Mondays until 4:00. I will also make myself available during will take this responsibility seriously and do my best to contribute. Finally, I will be a leader r my peers.
Student Signature:	Date:
To the Parent:	Student Senate
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Parent Signature:	Date:
To the Student:	
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