

# **Student Application**

Beagle Middle School Comet Council

## **What is Student Council?**

Students will design, organize, and run activities such as school theme days, dances, community service projects, etc. Participation in this group will help students to build character, leadership skills, decision-making skills, organizational skills, and responsibility while allowing them to contribute in a positive way to school activities and the overall school atmosphere.

## **Participant expectations**

- Attend meetings after school on Mondays from 2:40 to 3:30 PM a minimum of twice each month (2<sup>nd</sup> and 4<sup>th</sup> Mondays). More than 3 unexcused meeting absences may result in removal from the council.
- Work with other council members to design, organize, and oversee council-sponsored activities that promote involvement by the entire student body. These activities will take place during and after school throughout the academic year.
- Communicate with peers, teachers, and community members (including the Grand Ledge PTO) to facilitate activities.
- Maintain passing grades in all classes (60% or higher).
- Be a positive and respectful role model in the school and in our community.

## **Application Requirements**

1. Complete and submit the Comet Council Student Application.
2. Obtain two (2) recommendations from current or past teachers. Let these teachers know that they have 2 options for completing the form. (See Teacher Recommendation Form instructions.)
3. All application materials must be submitted to Mrs. Savage, Mrs. Earle, or Mrs. Fredericks by Friday, November 12. Late submissions will not be eligible for consideration.

If you have questions, please contact:

Mrs. Savage	<a href="mailto:savagec@glcomets.net">savagec@glcomets.net</a>
Mrs. Earle	<a href="mailto:earled@glcomets.net">earled@glcomets.net</a>
Mrs. Fredericks	<a href="mailto:frederickse@glcomets.net">frederickse@glcomets.net</a>



# Student Application Form

Beagle Comet Council

Name \_\_\_\_\_

Grade: 7 8  
(circle one)

Student School Email \_\_\_\_\_

CNC Teacher \_\_\_\_\_

1. Why would you like to be a member of the Beagle Middle School Comet Council?

---

---

---

---

---

2. What ideas do you have to improve our school?

---

---

---

---

3. What is your personal definition of a leader?

---

---

---

4. How do you respond when people don't agree with your ideas?

---

---

## Student and Parent Signatures

Beagle Comet Council

1. Please **READ** the following statements carefully, and then **SIGN** this application.
2. Ask your parent/guardian to READ and SIGN the application as well.
  - I understand that I must have transportation home promptly after Comet Council meetings and activities.
  - I understand that I must maintain passing grades in all of my classes.
  - I understand that I am expected to attend all council meetings. If I am unable to attend a meeting, I must notify an advisor (Mrs. Savage, Mrs. Earle, Mrs. Fredericks) in advance via email. Having more than 3 unexcused meeting absences may result in removal from the council.
  - I understand that as a Comet Council member I am AT ALL TIMES a representative of Beagle Middle School and am required to conduct myself accordingly.
  - I understand that as a Comet Council member, I will be held to a high standard, and disciplinary infractions may result in my dismissal from the council.
  - I agree to participate in Comet Council activities, events, and meetings.

I have read and understand the above statements.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I have read and understand the above statements and give approval for my child to participate in the Beagle Middle School Comet Council.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Info	_____	_____
	First and Last Name	Phone

Emergency Contact 1	_____	_____
	First and Last Name	Phone

Emergency Contact 2	_____	_____
	First and Last Name	Phone



# Teacher Recommendation Form

Beagle Middle School Comet Council

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

Grade: 7 8  
(circle one)

**Teacher:** This student is applying to become a member of the Beagle Middle School Comet Council. Each student is being asked to get two teacher recommendations. Teacher input is very important to allow us to make careful selections to ensure the success of the council. Please take a moment to complete one of the following options. Your help is greatly appreciated!

Option 1: TEACHER turns in this form to Mrs. Savage

Please rate the student in each area by circling the appropriate number, then sign the form and **place it in Mrs. Savage's mailbox** (or bring it to Room 208) no later than Friday, November 12.

	poor										excellent
Responsible & Reliable	1	2	3	4	5	6	7	8	9	10	
Respectful	1	2	3	4	5	6	7	8	9	10	
Positive	1	2	3	4	5	6	7	8	9	10	
Respected Peer Leader	1	2	3	4	5	6	7	8	9	10	

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

Date \_\_\_\_\_

Printed Name \_\_\_\_\_

Comments (optional):

- OR -

Option 2: STUDENT turns in form

Your signature on this form indicates that you believe the student named at the top of the form is an excellent candidate for the Beagle Comet Council, because the student is responsible, resourceful, cooperative, reliable, prepared, positive, and a respected leader among peers.

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

Date \_\_\_\_\_

Printed Name \_\_\_\_\_

Comments (optional):



# Teacher Recommendation Form

Beagle Middle School Comet Council

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

Grade: 7 8  
(circle one)

**Teacher:** This student is applying to become a member of the Beagle Middle School Comet Council. Each student is being asked to get two teacher recommendations. Teacher input is very important to allow us to make careful selections to ensure the success of the council. Please take a moment to complete one of the following options. Your help is greatly appreciated!

Please rate the student in each area by circling the appropriate number, then sign the form and **place it in Mrs. Savage's mailbox** (or bring it to Room 208) no later than Friday, November 12.

	poor										excellent
Responsible & Reliable	1	2	3	4	5	6	7	8	9	10	
Respectful	1	2	3	4	5	6	7	8	9	10	
Positive	1	2	3	4	5	6	7	8	9	10	
Respected Peer Leader	1	2	3	4	5	6	7	8	9	10	

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

Date \_\_\_\_\_

Printed Name \_\_\_\_\_

Comments (optional):

- OR -

Your signature on this form indicates that you believe the student named at the top of the form is an excellent candidate for the Beagle Comet Council, because the student is responsible, resourceful, cooperative, reliable, prepared, positive, and a respected leader among peers.

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

Date \_\_\_\_\_

Printed Name \_\_\_\_\_

Comments (optional):