

# CARMEL VALLEY MIDDLE SCHOOL

## APPLICATION FOR LEADERSHIP

NAME: \_\_\_\_\_  
CURRENT GRADE LEVEL: 6<sup>th</sup> 7<sup>TH</sup> OR 8<sup>TH</sup>  
Is Leadership your 1<sup>st</sup> 2<sup>nd</sup> 3<sup>rd</sup> 4<sup>th</sup> or 5<sup>th</sup> choice?

### PART ONE:

Write a ONE –PAGE (no longer!) typed statement briefly addressing each of the areas listed below. **You will attach your statement to this application.**

- Why do you want to be in Leadership?
- What activities are you involved in and how would you manage those responsibilities with your responsibilities in ASB?
- How do you feel about working with other people who aren't necessarily your friends?
- What are some strategies you practice in order to manage time?
- What do you think makes a good leader? Give an example of a good leader who has these qualities.

### PART TWO:

I understand that ASB has many responsibilities such as before school, after school and lunch time activities and planning. I also understand that I will be responsible and trusted to do all of my work and have it completed on time. If I am selected as a member of ASB, I promise to do my fair share to help plan, facilitate, and clean-up after these activities with enthusiasm and dedication.

Have you ever received a detention? YES NO If yes, please explain \_\_\_\_\_

Teacher who assigned detention: \_\_\_\_\_

Have you ever received a Referral? YES NO If yes, please explain \_\_\_\_\_

Teacher who assigned Referral: \_\_\_\_\_

Parent Signature:

Student Signature:

\_\_\_\_\_

\_\_\_\_\_

**Please see back of sheet for parts 3 & 4.**

**PART 3**

**Please fill in your current schedule below (Current 7th graders only).**

<b>Teacher</b>	<b>Grade</b>
1.	
2.	
3.	
4.	
5.	
6.	

After completing parts 1 – 3 of this application please attach your essay to this form and submit it to the teacher of your choice for a recommendation. This teacher will complete part 4 and return the entire application to Mrs. Vermilyea.

**PART 4 Confidential Teacher Recommendation.**

**RECOMMENDING TEACHER’S NAME:** \_\_\_\_\_

**Student Applicants name:** \_\_\_\_\_

**Please indicate:      1 – disagree                  2 – agree                  3 – strongly agree**

- |  |   |   |   |
|--|---|---|---|
| 1. This student is responsible and hard working  | 1 | 2 | 3 |
| 2. This student respects and values the school’s equipment / and the belongings of others. | 1 | 2 | 3 |
| 3. This student is able to work efficiently and independently with little supervision.     | 1 | 2 | 3 |
| 4. This student is able to work collaboratively with peers as a leader or group member.    | 1 | 2 | 3 |
| 5. This student is highly motivated and self-directed.                                     | 1 | 2 | 3 |
| 6. This student shows respect for all staff and students.                                  | 1 | 2 | 3 |
| 7. This student can manage time effectively.   | 1 | 2 | 3 |

Please give any information you feel is important about this student’s strengths and weaknesses. **(YOUR COMMENTS ARE HIGHLY VALUED)**

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**Teacher Signature:** \_\_\_\_\_

**Teachers , once completed please return to Holly Vermilyea. Thank you for your time!**