G-PISD Board of Trustees’

STUDENT ADVISORY COUNCIL

APPLICANT SEARCH | 2018-19



The **Gregory-Portland ISD Board of Trustees’** **Student Advisory Council (SAC)** provides feedback and insight to the School Board and Administration, often suggesting viable solutions to meet student needs across the district as well as learning about the governance role of the School Board. The SAC Council meets with School Board members, the Superintendent of Schools, and District and Campus Administrators each month, from August to May, during the school year.

DUTIES ELIGIBILITY REQUIREMENTS

*Questions? Please contact your Principal and/or contact Crystal Matern at 361-777-1091 ext. 1031 (email:* [*cmatern@g-pisd.org*](mailto:cmatern@g-pisd.org)*).*

* Current G-PISD 8th – 11th Grade students are eligible to apply and serve during the following school year (as G-P High School students)
* SAC members must maintain a 2.5 or better Grade Point Average (GPA)
* No failing grades or unsatisfactory marks on the preceding end-of-year report card
* Candidate(s) must complete the Application Form by the deadline to be considered
* Adhere to behavioral expectations outlined in the Student Handbook/Code of Conduct (you can view this information at [www.g-pisd.org/handbook](http://www.g-pisd.org/handbook)).
* Must be able to serve a one-year term in the following school year and fulfill all duties of SAC membership *(listed at left)*
* Experience in school leadership or student activities is **NOT a requirement** to serve as a SAC member
* Must be willing to accept the results of a blind application process (where a committee reviews information in which student name(s)/identities have been removed from application documents) to allow for equal / fair student selection
* Attend Student Advisory Council (SAC) meetings scheduled during lunch period at G-P High School *(One meeting per month during the school year, lunch provided)*
* Be prepared to actively engage in meaningful dialogue regarding students’ views, concerns, and perspectives
* Act as an advocate for positive change among the student body
* Share information with the student body about SAC and gather input from your peers to contribute to topics of discussion
* Be willing to learn about school-related issues and school governance, both locally and across the state/nation
* Make an effort to attend at least one (1) school board meeting during the school year in which you serve as a member of SAC\*
* Consider opportunities to serve as a volunteer at district events as a SAC member, when able, and provide your own transportation to/from those events\*

*\*This duty is not a requirement, but rather an opportunity for students who may be able to attend a district event when such an opportunity may arise.*

G-PISD Board of Trustees’

STUDENT ADVISORY COUNCIL

APPLICATION FORM | 2018-19



**INSTRUCTIONS:** This application process is available to identify Student Advisory Council (SAC) members who will serve a one-year term during the 2019-20 school year. The opportunity is open to every eligible student (see attached eligibility information sheet).

**Please complete the application and return it to your Principal’s office, or submit online at www.g-pisd.org/SAC, no later than 3:00 p.m. on Friday, March 29th.**

**STUDENT INFORMATION:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| FIRST NAME / Middle Initial | | LAST NAME | | BIRTH DATE |
| HOME ADDRESS (Street, City, State, Zip Code) | | | | STUDENT PHONE NUMBER |
| STUDENT EMAIL ADDRESS | | PARENT/GUARDIAN NAME(s) | | PARENT/GUARDIAN PHONE NUMBER(s) |
| CURRENT GRADE LEVEL (2018-19)  🞏 8th Grade 🞏 10th / Sophomore  🞏 9th / Freshman 🞏 11th / Junior | | GENDER *(Optional)* | ETHNIC / RACIAL GROUP *(Optional)*  🞏 American Indian/Alaskan 🞏 Hispanic 🞏 Other:  🞏 Asian 🞏 Pacific Islander  🞏 African American 🞏 White/Caucasian | |
| **REFERENCE:** In the spaces below, please provide one (1) reference of someone over the age of 18 NOT related to you (example: teacher, school administrator, or someone in the community who you look up to and knows you well) | | | | |
|  | NAME (Adult who is not related to you) | | JOB POSITION / TITLE | |
| EMAIL ADDRESS | | CONTACT PHONE NUMBER (include area code) | |
| **Have you served on the Student Advisory Council before (in the first year, 2018-19)?** 🞏 YES 🞏 NO  **\*Please answer questions on Page 2 (and/or the reverse side of this sheet) prior to turning** **in** **your** **application**.\* | | | | |
|  | | | | |
| **SIGNATURES REQUIRED** | | | | |
| ***STUDENT:*** *I have read the cover page to this application including the duties and eligibility requirements of serving on the School Board’s Student Advisory Council (SAC). I certify that the information written and submitted with this application represents my own work.*  *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*  *Student Signature Date* | | | | |
| ***PARENT/GUARDIAN:*** *I understand that my support will be essential in ensuring my child is a successful Student Advisory Council (SAC) member. I am aware that selections will be made through a blind selection process (with identifying information removed from the student’s application content), as the intention of the School Board is to ensure all students have a fair and equal opportunity to serve. All information, including responses to short answers that are reviewed by a Selection Committee, is to remain confidential.*  *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*  *Parent/Guardian Signature Date* | | | | |

**Student Advisory Council Application – PAGE 2 of 2**

**Please give a brief answer to the following questions. You may legibly handwrite answers or type. Feel free to attach a separate page if you need more space to answer.**

**INFORMATIONAL QUESTIONS:**

* How did you hear about this opportunity?
* Have you attended Gregory-Portland ISD (G-PISD) since Pre-K or Kindergarten? If YES, which G-PISD elementary school did you attend? (If NO, please list the grade level and campus you attended in your first year as a G-PISD student.)

**SHORT ANSWER QUESTIONS:**

1. What is one thing you would like to change at your school and/or within the school district (G-PISD)? Please explain your answer.
2. Who is your favorite teacher and why?
3. Would you communicate with others about the topics discussed in Student Advisory Council meetings? Why would it be important to do so?
4. Why are you interested in serving on the School Board’s Student Advisory Council (SAC)? Please include information about yourself that will help us know you better.