

Appendix E

RETURN COMPLETED APPLICATION AND SUPPORTING DOCUMENTS TO:

Director of Education
80 Sheppard Avenue East
Toronto, Ontario
M2N 6E8
416-229-5353

STUDENT TRUSTEE APPLICATION FORM for students in their 3rd year
(Term of Student Trustee: September 1, 2015 – August 31, 2016)

Name: _____
Address: _____
Phone #: _____ Grade: _____
School: _____

PLEASE FEEL FREE TO USE ADDITIONAL PAPER TO COMPLETE YOUR RESPONSE

1. Please describe any leadership experience you may have both inside and outside of your school community.

2. Why are you interested in becoming the Student Trustee for the Toronto Catholic District School Board?

3. What are your goals as Student Trustee?

4. What does student empowerment mean to you?

5. How will you ensure that the students from the Toronto Catholic District School Board are effectively represented?

6. Given that we are a Catholic Board, how will your position as Student Trustee be different from the position in the public system?

7. How do you see yourself being a responsible and dedicated member of the board, considering the large commitment it will involve, while maintain a high level of academic achievement in your school studies?

PRINCIPAL'S ENDORSEMENT: _____

Please include 1 letter of reference from a teacher at your school and 1 from an administrator other than this endorsement.