



**File: BBBB-F**

## **Essex County Public Schools**

### **SCHOOL BOARD STUDENT LIAISON APPLICATION FORM**

*In order to be considered as a student liaison, you must first submit a signed and completed form. All application items must be submitted as a complete package. Incomplete applications will not be reviewed.*

*The student liaison is expected to attend the School Board business meeting each month and will lead the Pledge of Allegiance at that meeting. There will be an agenda item for the liaison to share pertinent information, concerns, or accomplishments from the high school. Additionally, the liaison will serve in an advisory capacity and shall not vote; they will not participate in any closed meetings. From time to time, the board may request the student liaison to complete research and data collection for the board.*

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Permanent Address: \_\_\_\_\_

\_\_\_\_\_

Home Telephone Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Parent Name(s): \_\_\_\_\_

Dates available to perform duties: \_\_\_\_\_

#### **Education:**

Scholastic Honors and/or Licenses: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Participation in Sports, Clubs, or other Activities: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Employment History** (includes paid, volunteer, and intern positions)

Most Recent Employer: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Address: \_\_\_\_\_

Supervisory (Name & Title): \_\_\_\_\_

Position Title: \_\_\_\_\_

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Description of Duties: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Employer: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Address: \_\_\_\_\_

Supervisory (Name & Title): \_\_\_\_\_

Position Title: \_\_\_\_\_

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Description of Duties: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Employer: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Address: \_\_\_\_\_

Supervisory (Name & Title): \_\_\_\_\_

Position Title: \_\_\_\_\_

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Description of Duties: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**References**

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Company/School: \_\_\_\_\_

Relationship: \_\_\_\_\_ Known How Long: \_\_\_\_\_

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Company/School: \_\_\_\_\_

Relationship: \_\_\_\_\_ Known How Long: \_\_\_\_\_

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Company/School: \_\_\_\_\_

Relationship: \_\_\_\_\_ Known How Long: \_\_\_\_\_

Why you would like to work as a School Board Liaison?

---

---

---

---

---

---

---

---

---

---

*I certify that all of the statements in this application are true and complete to the best of my knowledge. I understand that a false or incomplete answer may be grounds for not considering me.*

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**PARENT COMMITMENT:** *I understand that, if my child is selected as the School Board Liaison, they will need to have transportation for attendance to monthly board meetings. I support them in this endeavor.*

**Parent Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_