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**Student Leadership Council Application**

**2016 – 2017**

Thank you for your interest in applying for the Student leadership Council.

These positions will offer opportunities for students to engage in a variety of activities and service learning projects that help to build NLF spirit and to become active members of their community.

These roles are open to all 10th-12th grade NLF members.

The council members may earn extra SSL hours through their duties.

**Duties of the council position**

• Display good leadership and responsibility

• Be a good role model for NLF students

• Come to rehearsal 15 min early and stay at least 15 min after end of rehearsal

• Look for concert venues (lock-in and benefit concert)

• Organize and print music

• Publicize NLF through social media and posters

• Make posters for NLF (design, distribution, etc.)

• Introduce NLF at concerts

• Monthly video chat meetings among the council members

• Biweekly 30 minute online bible study

• Be prayer warriors for NLF

• Help out with NLF tasks as assigned by NLF leaders.

**Instructions**

Complete the following application.

Return your completed application by April 3th, 2016 to the NLF by e-mail.

*New Life Youth Orchestra NLYO<newlifeyouthorchestra@gmail.com>*

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**Student Council Application & Questionnaire**

**Student Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Grade in 2016-17(10-12th grade)**: \_\_\_\_\_\_\_\_\_\_\_\_

**Instrument**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**E-mail Address** :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Phone Number**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please answer the following questions**

 1. **How long have you been in NLF?**

2. **Why are you in NLF?**

3. **List three character traits that best describe you.**

4. **Why do you do community service?**

5. **What leadership skills do you have?**

6. **What are ways you plan on publicizing NLF?**

7. **Why do you want to be a member of the Student Leadership Council?**

8. **What do you want to accomplish after being chosen as a member of the Student Leadership Council? How do you plan on accomplishing those things?**

9. **Write your personal testimony.**

I understand that if I am selected to become a member of the Student Leadership Council representing NLF as a leader and serving as a role model for other members.

**STUDENT SIGNATURE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

I give permission for my child to apply for student leadership council member.

**PARENT SIGNATURE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_