2016 district 3 overnighter J.C. Application

NOTE: Submit this paper application At the District 3 fall conference. If you want to express creativity, you are allowed ONE 8.5 x 10 inch additional page. Three dimensional additions, videos, or anything with sound will be discarded. Please attach a photo with the application.

**Process**

1. Complete and print application.

2. Bring application to District 3 Fall Conference

3. Attend JC Applicant breakout session. You will submit your application as part of your admittance to the breakout session.

**DUE DATE: IN HAND at the fall conference**

**EXPECTATION: Applicant MUST be able to attend the fall conference. At the fall conference, applicants must check in at the Parliamentarian table to receive their entrance ticket for the required applicant break out session.**

STUDENT APPLICATION

Students: Please complete this application (including the personal statement) and give to your Advisor to complete the evaluation. Be sure to obtain your principal’s signature. *Click and type into the yellow boxes on the form below.*

**Check one:**  Male  Female

|  |  |
| --- | --- |
| **Student Name:** | **Student E-Mail:** |
|  |  |
| **School Name:** | **StuCo Advisor Name:** |
|  |  |
| **School Address:** | **School City / State / Zip:** |
|  |  |
| **Student Home Address:** | **Student Home City / State / Zip:** |
|  |  |
| **Student Home Phone:** | **School Phone:** |
|  |  |
| **Student’s Current Grade Level:** | **Student’s Current Age:** |
|  |  |
| **Student’s Cell Phone:** |
|  |

2016 district 3 overnighter J.C. Application

STUDENT APPLICATION  
Check all that apply regarding your Student Council Experience:

Officer: (list)

Committees: (list)

District Officer: (list)

State Officer: (list)

Other Leadership Positions:

Have you been a TASC J.C. before? (list)

**List TASC Summer Workshop(s) attended as a participant:**

Year:       Location:

Year:       Location:

**Have you attended an Advanced Leadership Workshop?**

Year:       Location:

Year:       Location:

**List other workshops attended (NLC, HOBY, FFA, etc)**

Year:       Location:

Year:       Location:

Year:       Location:

**Technical Expertise:**

Low  Med  High

**Rank (1-5) your TOP FIVE strengths ONLY:**

Flexibility

Follows directions

Responsible/dependable

Stage presence

Able to share the stage

Other-oriented

People person

Artistic (draw, paint, letter)

Musical (sing, play instrument)

Willing to work hard, especially behind the stage

Follow-through

Maturity

Adapts to new situations

Self-starter

Please rank the following that best describes you (1 being most like you; 4 being least like you)

      Relationship-oriented, Being Real, Drama, Romance, Helping Others, Peacemaker.

      Duty, Responsibility, Caretakers, Ceremony, Organization, Stability.

      Innovation, Competence, Problem Solver, Self-Critical, Independent, Straightforward.

      Action, Impulsive, Less structure, Excitement, Storyteller, Fun-loving

\*Personal Summary: Type below or attach a brief summary, explaining why you are qualified to be a Junior Counselor.

I affirm that I intend to be an active TASC member in 2016-2017. I know it is my responsibility to arrange transportation to and from the workshop site. I know that I must be at the workshop site approximately 1 hour prior to the start of the workshop. I know I must return forms by the due date specified.

Student Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Principal Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**The deadline for applications is October 15, 2016**

**ADVISOR EVALUATION**

**Advisors: Please collect your student’s application, complete this evaluation and return to the applicant in a sealed and signed envelope.**

**This evaluation is not to be seen by the STUDENT applicant.**

Please rate this applicant in the following areas with 1 being low and 5 being high. (n/o = “Not Observed.”)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **AREA:** | **1: LOW** | **2** | **3** | **4** | **5 HIGH** | **Not Observed** |
| Flexibility |  |  |  |  |  |  |
| Follows directions |  |  |  |  |  |  |
| Responsible/dependable |  |  |  |  |  |  |
| Stage presence |  |  |  |  |  |  |
| Able to share the stage |  |  |  |  |  |  |
| Other-oriented |  |  |  |  |  |  |
| People person |  |  |  |  |  |  |
| Artistic (draw, paint, letter) |  |  |  |  |  |  |
| Musical (sing, play instrument) |  |  |  |  |  |  |
| Willing to work hard  (esp. behind the stage) |  |  |  |  |  |  |
| Follow-through |  |  |  |  |  |  |
| Maturity |  |  |  |  |  |  |
| Adapts to new situations |  |  |  |  |  |  |
| Self-starter |  |  |  |  |  |  |
| Public speaker |  |  |  |  |  |  |
| Character |  |  |  |  |  |  |

**Mandatory Advisor Comments:** (Applicants may not be considered without advisor comments.)

I certify that all information submitted by applicant and advisor is correct. I also acknowledge that he/she will need to be a the assigned workshop the day before the workshop is to start at a time designated by the director and will not be dismissed until released by the director. I also know that the student must return forms by a date set by the director or he/she may be replaced.

Advisor name:

Advisor Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_