

TO: **Current and Potential** Student Leadership Team Members
FROM: SLT Mentors
RE: 2017-2018 Student Leadership Team

I would like to participate on the Student Leadership Team. I am aware that being a member of SLT is a privilege and holds the responsibility of knowing how to act as a leader in all aspects of the school day (for example: classwork, homework, lunch, recess, bus, hallway, bathroom). I realize if I am not being consistently responsible, I will no longer be able to participate in SLT.

Please complete the form below, have it signed by a parent or guardian, and return it to the Main Office by Friday, **October 20, 2017**. If it is not received by this date, you will not be eligible for SLT this year.

Name: _____ Grade/Room #: _____

ALL STUDENTS, please select five of the projects listed below and rank them in order of preference (1 being most preferable, 5 being least).

In addition to your Student Leadership Team project, anyone can choose to participate in **EARLY ACT***, which requires an additional time commitment.
(see description on separate page)

Please arrange for a ride home on the following meeting dates (held from 3:15- 4:00):
November 13, 2017 February 13, 2018 May 22, 2018

Weekly School Service Project:

Please select five of the projects listed below and rank them in order of preference.

(1 being most preferable, 5 being least)

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> Help in preschool | <input type="checkbox"/> Help in Kindergarten | <input type="checkbox"/> Help in 1 st grade | <input type="checkbox"/> Help in 2 nd grade |
| <input type="checkbox"/> School Spirit Team | <input type="checkbox"/> Lost & Found Helper | <input type="checkbox"/> Library Assistant | <input type="checkbox"/> Mr. Ogden's Assistant |
| <input type="checkbox"/> Phys. Ed. Assistant | <input type="checkbox"/> Music/Recorder Assistant | <input type="checkbox"/> The Green Team | <input type="checkbox"/> Art Helper |
| <input type="checkbox"/> Playground Assistant | <input type="checkbox"/> Kindergarten Lunch Help | <input type="checkbox"/> Dismissal Buddy | <input type="checkbox"/> Office Asst. |
| <input type="checkbox"/> Band/Orch. Helper | <input type="checkbox"/> Cafeteria Helpers | <input type="checkbox"/> Playground Cleaner | |

(check if yes) **PLUS, I WOULD ALSO LIKE TO PARTICIPATE IN EARLY ACT THIS YEAR.** *Early Act meetings will take place before school (7:45 – 8:40), one*

Wednesday month,

dates to be determined. Be sure you can get to school early before you commit to Early Act!

DOYON STUDENT LEADERSHIP TEAM (SLT)

APPLICATION

Name: _____ Date: _____

Grade: _____ Homeroom: _____

Tell us about yourself. What qualities and talents could you offer to this group?

Student Signature: _____ Date: _____

In the space below, please have an adult who knows you well write a short recommendation.

I support this child in his/her willingness to be a member of the Doyon Student Leadership Team, and will provide transportation home at **4:00** on the following meeting dates:

November 13, 2017 February 13, 2018

May 22, 2018

Parent/Guardian Signature: _____ Date: _____

EARLY ACT TEAM, 2017-2018

EARLY ACT is a Community Service partnership between Doyon SLT Members and the Rotary Club of Ipswich. Here's how it works:

- You receive a weekly SLT job and you perform that service weekly.
- Plus you CHOOSE to join Early Act.
- You attend ONE BEFORE SCHOOL meeting per month (a Wednesday from 7:45 – 8:40). Once you are in Early Act, you will receive a meeting schedule.
- At the monthly meetings, students meet with members of the Ipswich Rotary Club. As a team we will brainstorm and choose community service projects to complete this year.
- For more information about Early Act, visit our website by going to:
<https://sites.google.com/a/ipsk12.net/doyon-early-act-team2/>
This information can also be found on the Doyon School Website under the “Student Activities” tab.