

Return this form to the PE Office or to Ms. Levicke by Feb. 2nd.

District 218
Physical Education Department

APPLICATION FOR STUDENT LEADERSHIP PROGRAM

Name: _____

Grades per semester for Physical Education (overall grade in P.E. *must* be at least a B average)

Fr. (1st sem) _____ Fr(2nd sem) _____ Soph (1st sem) _____

Total number of referrals this year _____

(This information will be verified)

The qualities the P.E. staff is looking for in applicants are:

Punctuality	Assertiveness	Voice control	Cooperation
Role model	Self-assured	Eagerness	Positive Interaction
Knowledge of sports / activities		Solid skill level	Initiative

List the 3 P.E. / Health / Driver Education Instructors who know you best:

Current P.E. / D.E. Instructor _____ Period _____

What are your leadership strengths?

List at least 3 responsibilities/activities held now in school and / or community activities.

List 3 sports or activities that you enjoy or excel at.

- 1.
- 2.
- 3.

List 3 sports or activities that you consider a weakness.

- 1.
- 2.
- 3.

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I understand that if I am accepted into the program, I am making a 2-year commitment and may not drop or waiver as a junior or senior. I understand that I may be assigned to work with any P.E. class and cannot make requests.

Signature _____

Date _____

Parent Signature _____

Date _____

At the bottom of this application **write an essay** as to why you want to become a student leader.