



Walking In Authority (WIA) Teen Council

OFFICIAL APPLICATION

PLEASE PRINT CLEARLY

Please fill in the form below and send to wiateencouncil@gmail.com and membership.wiateencouncil.com

Name:			
Address:			
Address:			
City:	State:	Zip Code:	Birthday: / /
School:		Grade:	
Email:		Phone:	
Parent's Name:			
Parent's Email:		Parents Phone:	
I am interested in joining the Walking In Authority (WIA) Teen Council because:			
Some of the things I have done at school, or outside of school that I think would help me be a good teen council representative/participant are:			
Two adult references and their phones numbers are:			
Reference Name:		Phone:	
Reference Name:		Phone:	
As a member of the Walking In Authority Teen Council, and representative for my school, I know that I will be responsible to do the following:			
<ol style="list-style-type: none"> 1. Attend all teen council meetings. 2. Participate in and promote Walking In Authority activities. 3. Encourage my school and my classmates to participate in teen council activities. 4. Earn passing grades of A's and B's, C's are permitted, but not encouraged. 5. Conduct myself in a courteous, polite, and professional manner. 6. Display respect and value to the leadership of the Walking In Authority Teen Council. 			
Student's Signature			
Parents Signature		Date	