

**** Please submit by the end of March ****

SSBTR Co-Chair Application

Name: _____ **School & Year:** _____

Phone: _____ **E-mail:** _____

Applying for (CHECK one in 1st column, and RANK 2nd column by preference):

<input type="checkbox"/> Treasurer	<input type="checkbox"/> Media and Public Relations Committee Head
<input type="checkbox"/> Secretary	<input type="checkbox"/> School Coordination Committee Head
<input type="checkbox"/> Co-Chair	<input type="checkbox"/> Entertainment/Food Committee Head

1. What is your prior involvement in SSBTR?

2. How did you learn about SSBTR and why have you become involved?

**3. What other activities are you involved in and at what level?
What kind of time commitment can you give to SSBTR?**

4. What prior experience do you have in your number one choice of committee head?

5. What changes or improvements would you like to bring to SSBTR?

6. What are your personal goals in being a part of the SSBTR Student Board?

**** Please hand in forms or scan to admin@ssbtr.org or fax to 480-991-9157 ****