



STUDENT BOARD MEMBER APPLICATION

Student Name: _____ Contact Phone: _____

Contact Email: _____

Parent Signature: (Please Print & Sign) _____

Signature of Guidance Counselor to verify 2.0 or higher, GPA:
(Please Print & Sign) _____

Signature Knob Creek Conservancy Member to verify volunteer time (other than family): _____

1.Explain your interest/use of the MLT:

2.Describe your leadership/responsibility skills:

3.Describe your ideas to promote volunteering and use of the MLT among your peers:
