

Student Council ASB Sister School Representative Acceptance of Office Agreement

Please initial each statement below. Initialing each statement below represents your agreement with each statement.

____ I accept full responsibility for the duties and responsibilities of my position as a member of the Don Bosco Technical Institute Student Council as stated in the ASB Constitution and subsequent job descriptions.

____ I understand that I must maintain the appropriate grade point average to maintain my membership and elected position on the student council.

____ I understand that I am to maintain the integrity of my membership on student council. Any disciplinary action may result in immediate removal from the student council at the discretion of the Director of Student Activities.

____ I understand that inappropriate behavior (such as dishonesty, defamation of character upon another individual, theft, cheating, or any other actions or behavior which compromises the honor of our school and/or student council), which includes but is not limited to, that which discredits or compromises the honor code and ethics of student council is grounds for immediate removal from office and membership on the student council at the discretion of the Director of Student Activities.

____ I understand that as an example to my peers, my timely attendance at my school is important to maintaining the integrity of my position in the student council and any necessary disciplinary action on the school's part may result in further disciplinary action within the student council, including but not limited to suspension or removal from office.

____ I understand that attendance is required at all regularly scheduled Student Council meetings and that if I miss 25 percent of the meetings due to tardy or absence, I am subject to membership probation and/or removal from office.

____ I will uphold the Constitution of the Associated Student Body and the values of Don Bosco Technical Institute as published by the school administration and the Student Council.

____ I will uphold the Constitution of the Associated Student Body and the values of _____ as published by my school administration and the Student Council.

Name: _____

Witness: _____

Signature: _____

Signature: _____

Office: _____

Date: _____