

Florida Association of Student Councils MIDDLE SCHOOL STUDENT OF THE YEAR

In order to receive this award the student must be nominated by his/her student council. The nomination packet must include a letter from the student council advisor, the student council president (or from another officer appointed by the advisor in the event that the president is the nominee) and the school's principal. The letters must include evidence of the following:

- 1) The nominee is open to new ideas from his/her peers.
- 2) The nominee is willing to work well with all students
- 3) The nominee is supportive of all of the activities sponsored by the school's student council.
- 4) The nominee demonstrates an interest in a wide area of student concerns.

The same student may be nominated a number of times by his/her student council however, once a student receives this award he/she will be ineligible to receive it again.

The nominee does not have to be an officer of the school's student council but, must have been a member of the council for at least one full school year.

The application must be mailed to the Executive Director via one of the following:

Via U.S. Postal Service to:

FASC Executive Director
Lockhart Stadium
P.O. Box 5408
Ft. Lauderdale, FL 33310

OR

Via UPS, FedEx, DHL, etc. to:

FASC Executive Director
Lockhart Stadium
1350 NW 55 Street
Ft. Lauderdale, FL 33309

**ALL NOMINATIONS MUST BE POST MARKED ON OR
PRIOR TO THE SECOND WEDNESDAY OF FEBRAURY**

MAKE SURE THE LETTERS OF RECOMMENDATION FROM THE APPROPRIATE STUDENT COUNCIL OFFICER, THE ADVISOR AND THE PRINCIPAL ARE ATTACHED.

I. OFFICER POSITIONS HELD IN STUDENT COUNCIL

Position	Year
1. _____	
2. _____	
3. _____	
4. _____	
5. _____	
6. _____	

II. PARTICIPATION IN OTHER SCHOOL ORGANIZATIONS/ACTIVITIES

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____

III. PARTICIPATION IN STATE OR FASC DISTRICT ACTIVITIES

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____

V. RECOGNITIONS AND AWARDS

Award	Year
1. _____	
2. _____	
3. _____	
4. _____	
5. _____	
6. _____	
7. _____	
8. _____	
9. _____	

I certify that the above information is true.

Signature of Student Council Advisor

Date