



PRESCOTT SCHOOL DISTRICT
**STUDENT MEMBER
 APPLICATION FORM**

Official Use Only

Available at
<http://www.prescott.k12.wa.us>

Student's Name		E-mail Address	
Mailing Address		Home Telephone Number ()	Cell Telephone Number ()
		City	County Zip Code
High School		Principal's Name	Principal's Telephone Number ()
School District		Superintendent's Name	Supt. Telephone Number ()
Parent's (Guardian's) Name		Parent's (Guardian's) Telephone Number ()	

Please be concise as you complete this application.

Observe the limits of your responses as indicated.

All applications, including letters of recommendation, will be considered public records.

Written Responses. The application may be downloaded from the website above and should be completed by computer. The completed application must be included with supporting documents.

Letters of Recommendation. Please provide three letters of recommendation from the following, and enter here the names of the individuals who are writing the letters.

	One of your high school teachers:	Name
	An administrator (e.g., principal, vice principal, or counselor) at your high school:	Name
	Someone who knows you personally (<i>other than a member of your family or teacher</i>):	Name

Transcript. Please include a copy of the most recent high school transcript.

Optional Items. You may enclose supporting documents about yourself since you were in seventh grade (e.g., newspaper clippings, articles, etc.). Items from earlier years will not be reviewed. *Please include only photocopies, not originals documents.*

Reasonable Accommodation for Any Individual with a Disability. Pursuant to the *Rehabilitation Act of 1973* and the *Americans with Disabilities Act of 1990*, any individual with a disability who requires reasonable accommodation may request assistance by contacting the Superintendent's Office at the address below or by calling (509) 849-2217