

Utah PTA Student Leadership Committee Application



Mission Statement:

To make every child's potential a reality by engaging and empowering families and communities to advocate for all children.

Why we are here:

The Utah PTA Student Leadership Committee will help plan, develop, and carry out activities for students throughout the state who attend PTSA schools.

Program Objectives:

- Advocate Support and help students to speak out on behalf of themselves and other youth.
- Involve Encourage positive involvement in all facets of a child's life.
- Develop Assist in developing skills in our youth to protect them throughout their lives.

What will I be doing if I am involved:

You will attend monthly meetings with other youth representative, help plan and run activities and initiatives on the state level, and learn leadership skills and abilities to help with your local school PTSA groups.

JOB DESCRIPTIONS

ALL Utah PTSA Committee MEMBERS, regardless of their position, will:

- Have at least a "C" grade average and will maintain it.
- Maintain "S" or above in Citizenship or will be removed from the committee.
- Aim to be a positive example at all times.
- Continually stive to be tobacco, alcohol, and drug free.
- Not wear clothing that advertises alcohol, tobacco, other drugs, or gangs.
- Not be involved in any acts of violence (fighting, harassing, threatening, gangs, etc.)

COMMITTEE MEMBER RESPONSIBILITIES:

- 1. Will attend monthly Utah PTA Student Leadership Committee meetings to receive training, help plan activities, and to network with peers.
- 2. Will ensure that the information is taken back and shared with your school PTSA advisor and school PTSA group.
- 3. Will work with your school PTSA advisor and school group to plan and implement the activities outlined by the Utah PTA Student Leadership Committee.
- 4. Will promote the mission of Utah PTA at your school. Will be responsible for continual education of school members regarding PTSA activities, conduct, etc.
- 5. Will help coordinate and participate in state PTSA events (such as Battle of the Bands, PTSA Day at the Capitol, PTSA Student Leadership Conference, etc.) and other initiatives throughout the year.
- 6. Will complete assigned training, assignments, and duties on time.

Due Date: October 6, 2023

Approximately 2 Students per School

Grades 8th - 12th

CODE OF CONDUCT

I agree to abide by the following Code of Conduct and am aware that any infraction of the code may result in my dismissal as a Utah PTA Student Leadership Committee Member. In the event that it is determined that I have violated the code, I will be put on temporary probation until dismissal is determined by peers and advisors.

I understand that:

- The illegal possession and/or use of weapons, tobacco products, alcoholic beverages and illegal drugs, is prohibited.
- Sexual contact at any event, meeting or other activity associated with Utah PTA, is prohibited.
- Any behavior that violates any of the laws of the United States, of the State of Utah, or any local ordinance, is prohibited.
- My attendance and punctuality to scheduled meetings and activities for Utah PTA is required.
- I am making a commitment to fulfill all expected requirements & responsibilities, and to attend all meetings and activities.
- I am making a commitment to show respect for others and to do my best to be a positive example at all times.

I understand that the privilege of being a Utah PTA Student Leadership Committee Member requires a time commitment. I will make every effort to attend meetings and to fulfill the responsibilities listed out in the Job Descriptions page and given at meetings. If I accept a leadership position, I understand that I will be expected to fulfill additional responsibilities. I understand that the unexcused missing of meetings may result in my dismissal as a committee member. I also understand that I will be expected to most of the trainings and activities.

I understand that I will be responsible for providing other activities. I also understand that I may be asl activities. I understand that it is my responsibility to information. I agree to provide contact information communication regularly.	ked to miss school occasionally for Utah PTA to be aware and keep current on Utah PTA
Youth's Signature	Date
Youth's Name (please print legibly)	

Parent or Legal Guardian Consent

Utah PTA Student Leadership Committee Activities & Photo Release

I, the undersigned parent or legal guardian, give permission for my child to participate in various Utah PTA Student Leadership Committee activities throughout the year. I understand that my child will be involved in some physical activities as well as educational activities. I also understand that my child will be responsible for their own transportation to these various events.

I, the parent or legal guardian, will save harmless the Utah PTA, and its agents and employees from and against all claims, demands, damages, and causes of action of every kind of character on account of personal injuries, death, or damage to property arising because of, out of or in any way connected with, the Utah PTA activities.

I, the parent or legal guardian, assume liability for any personal injury or property damage arising from my child's participation in the activities associated with the Utah PTSA Student Leadership Committee.

I also give permission to the Utah PTA and its associated partners to record and photograph the image and/or voice of my child for the purposes of publicity, reports, and/or promotion. I understand and agree that these audio, video, film and or print images, comments, and quotes

Parent or Legal Guardian Signature	 Date	
Parent or Legal Guardian Name (please print)		
YOUTH'S FIRST & LAST NAME (please print)		



everychild.one voice.®

Utah PTA Student Leadership Committee APPLICATION

Email, mail, or deliver completed & signed application and parent consent to:

Utah PTA Attention: Kelly Adams 5192 S. Greenpine Dr.				
SLC, UT 84123				i
kelly@utahpta.org				
(Please print legibly)				
APPLICANT NAME:				
FIFST			Last	
APPLICANT PHONE: ()		CAN YOU I	BE REACHED	BY TEXT? Y/N
APPLICANT EMAIL ADDRESS:			APPLIC	ANT T-shirt Size: specify Youth or Adult size)
STREET (MAILING) ADDRESS:				
CITY:			STATE	ZIP
NAME OF SCHOOL YOU WILL ATTEND) 2023-24: _			GRADE:
PREFERRED METHOD OF CONTACT FO	OR STUDENT	EMAIL	TEXT	PHONE
PARENT/GUARDIAN NAME(s):				
PARENT PHONE: ()	C	AN PARENT	BE REACHE	D BY TEXT? Y/N
PARENT EMAIL ADDRESS:				
PREFERRED METHOD OF CONTACT FO	OR PARENT	EMAIL	TEXT	PHONE

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