STUDENT MEMBER APPLICATION

COMMUNITY AND CITYWIDE EDUCATION COUNCILS

All Community and Citywide Education Councils are required by NYS Education Law to have a non-voting student member. Only students who will be high school seniors during their year of service are eligible to apply; other requirements vary by council.

More information regarding the roles and responsibilities of Education Councils can be found at http://schools.nyc.gov/Offices/CEC/default.htm

For Community Education Councils (CECs), applicants must:

- **reside in the district where they are applying to serve (students may find out their school district by using NYC DOE's school search tool at www.schools.nyc.gov); and**
- **be a member of the elected student government or hold an elected leadership position (e.g., president of a club).**

For the Citywide Council on High Schools (CCHS), applicants must:

- **be a member of the elected student government or hold an elected leadership position (e.g., president of a club).**

For the Citywide Council on Special Education (CCSE), applicants must:

- **have an IEP.**

For the Citywide Council for District 75 (CCD75), applicants must:

- **attend a District 75 school or program.**

For the Citywide Council on English Language Learners (CCELL), applicants must:

- **attend or have attended an ESL or bilingual program.**

Interested students should complete the attached application and submit it to The Division of Family and Community Engagement Attn: Jon Sheehan (jsheehan3@schools.nyc.gov)

For further information, please email ccecinfo@schools.nyc.gov or call (212) 374 1936.

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STUDENT INFORMATION

Name: _____

Address: _____**Apt. #** _____

Borough_____**Zip Code**_____

Contact Number:_____**E-mail:**_____

SCHOOL 2015- 2016	**GRADE LEVEL**

I WISH TO SERVE ON (check the one that applies):

- ☐ **CEC _____ [district number]**
- ☐ **CCHS**
- ☐ **CCSE**
- ☐ **CCD75**
- ☐ **CCELL**

STUDENT SIGNATURE

I,_____(print name), certify that all information given herein is true and accurate to the best of my knowledge.

PARENTAL CONSENT

I, (print name), consent to my child's involvement in and appointment to a New York City Department of Education District Community Education Council (CEC), the Citywide Council on High Schools (CCHS), the Citywide Council on Special Education (CCSE), the Citywide Council for District 75 (CCD75), or the Citywide Council on English Language Learners (CCELL). I understand that participation will require his/her attendance at monthly meetings that will be open to the public and may occur during evening hours.

_____

Parent/Guardian Signature Relationship Date

I. ELIGIBILITY

Describe how you meet the eligibility requirements for the council to which you are applying (please refer to the eligibility criteria on p. 1).

II. BACKGROUND AND ACTIVITIES

Describe any school-related, community or civic activities in which you have participated in no more than 200 words.

III. STATEMENT

Explain why you want to serve on the CEC, CCHS, CCELL, CCSE or the Citywide Council for District 75 and what would make you an effective representative of all students in your community in no more than 200 words.

Student's Name_____

Student's Signature_____ **Date**_____