



Dear Prospective 2020-2021 SGA Candidate,

Thank you so much for your interest in being a part of the **2020-2021 SGA Leadership Class and Student Government Association** at Viera High School. We are so glad that you are considering being a part of Viera High School's Student Government Association. We appreciate the fact that you want to get involved, serve, and connect with your fellow students, staff, and community.

The **SGA Leadership Class** will provide an opportunity for the student to develop both intrapersonal and interpersonal speaking, listening, and writing skills necessary to develop a solid leadership foundation. Students will engage in both experiential learning exercises such as small group projects as well as a more traditional strand such as written reflections and audio-visual presentations. Students will also demonstrate responsible citizenship through active school involvement and service learning hours.

**Being a part of SGA is an honor and a privilege.** We are in charge of many important activities throughout the school year. Be prepared to spend numerous hours at school, both before and after. In addition, each SGA member is required to attend the Florida Association of Student Councils District meeting held at various locations across our FASC district. Beyond the required SGA activities, there will be a multitude of projects/activities/conferences which will be optional and may require personal funds to attend.

To be **eligible** you must be able to take the **SGA leadership class** (have room in your schedule), **answer the attached questions, get five Teacher Recommendations, three Student Recommendations, and do a video interview.** Please complete the Application and Required forms and return them to Mr.

**Torres in Room 3-211, or at [torres.gabriel@brevardschools.org](mailto:torres.gabriel@brevardschools.org).**

**Applications are due no later than Friday, April 17, 2020.**

Sincerely,

Mr. Gaby Torres

SGA Advisor



# Viera High School

## Student Government Leadership Class Application Form '20-'21

Name: \_\_\_\_\_ '20-'21 Grade Level: \_\_\_\_\_

Student #: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

List the classes you plan to take in the 2020-2021 school year: 1-\_\_\_\_\_ 2-\_\_\_\_\_

3-\_\_\_\_\_ 4-\_\_\_\_\_ 5-SGA Leadership Class 6-\_\_\_\_\_ 7-\_\_\_\_\_

G.P.A.: weighted \_\_\_\_\_ un-weighted \_\_\_\_\_ Any level 3 or higher discipline referrals: Y / N

If yes, please explain. \_\_\_\_\_

Administration's Signature to verify GPA and Discipline History: \_\_\_\_\_

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**ANSWER THE FOLLOWING QUESTIONS:** Type your answers and attach to this application.

1. What is your definition of Leadership?
  2. What do you think the role of SGA is at VHS?
  3. Explain why you want to become a member of the Viera High School SGA.
  4. What you would like to see SGA realistically accomplish this year?
  5. What school related activities were you involved in during the '19-'20 year and what activities will you be involved with in the '20-'21 school year?
  6. What are your strengths and weaknesses? List any special talents/abilities that you think would benefit SGA.
  7. Do you have a job after school? If yes, where? Do you have a boss who will understand that occasionally you will need to schedule some work time around SGA activities for which you will have to take off work?
  8. Describe yourself in three words:
  9. Tell us something about yourself that most people don't know.
  10. Do you have any suggestions that would benefit Viera High School? Please explain.
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## PLEASE READ CAREFULLY

Thank you for your interest in joining Student Government! Being a member of Viera's Student Government Association is a great responsibility. You must be willing to devote extra time and effort to your school. In addition, you must adhere to the following:

- ❖ **You must take the SGA leadership class.**
- ❖ **You must attend all SGA mandatory events.**
- ❖ **You must maintain a 2.5 unweighted G.P.A. with no D's or F's at any time while you are a member of the Student Government.**
- ❖ **You are required to complete five community service hours outside of the SGA community service events each quarter.**
- ❖ **You are required to attend eight school activities/events each quarter, including but not limited to club meetings (other than SGA), school plays or concerts, and Varsity sporting events.**
- ❖ **If you are involved in any Disciplinary Action by the school or police, you will be subject to immediate removal from SGA.**
- ❖ **Pay your SGA dues.**

**Remember that it is both a privilege and an honor to be selected as a member of SGA. SGA Members will also be required to adhere to the SGA Constitution, SGA rules and student code of conduct, and the BPS student code of conduct in order to remain as part of the SGA.**

I, \_\_\_\_\_, hereby declare my interest in being a part of the **2020-2021 SGA Leadership Class and Student Government Association of Viera High School**. In doing so, I hereby pledge to work to the best of my ability to promote the welfare of the student body and that of Viera High School. I agree to abide by the SGA Constitution, SGA rules and student code of conduct, and the student code of conduct of Brevard Public Schools. I recognize the fact that being a part of SGA is an honor and a privilege that will require additional time and energy. I understand that if I do not perform satisfactorily as a cabinet member, I may be placed on probation and that if there is no improvement I will be removed from SGA. I have read and fully understand the rules and I am ready to work.

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Signature of the Applicant

*I have read and fully understand the application. I am aware that my son /daughter's performance is greatly affected by my support (i.e. time, transportation, support, etc.). I also give my permission for my son/ daughter's school transcripts to be released for the purpose of determining qualifications for Student Government.*

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Signature of the Parent/ Guardian

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Printed Name of the Parent/ Guardian

If you have any questions please email Mr. Gaby Torres at [torres.gabriel@brevardschools.org](mailto:torres.gabriel@brevardschools.org).

**Applications are due no later than Friday, April 17, 2020. Please return the applications to Mr. Torres in Room 3-211, or at [torres.gabriel@brevardschools.org](mailto:torres.gabriel@brevardschools.org).**

# TEACHER RECOMMENDATION

(five are needed)

\_\_\_\_\_ is applying for Student Government for the 2020-2021 school year. Please take a few minutes to evaluate the above named student. The scale is 1 to 5, with 5 being the highest and one being the lowest. **Please explain in the comments line your reason for their evaluation.** It may help to consider this from a club sponsor's or coach's point of view.  
*Would you want this student in your club or on your team?*

These forms will be kept confidential. Please DO NOT return them to the student. **Please send the recommendation over to Mr. Gaby Torres** via email, [torres.gabriel@brevardschools.org](mailto:torres.gabriel@brevardschools.org). Thank you for your time and consideration!

<p><b>Responsibility</b> 1 2 3 4 5</p> <p>COMMENTS: _____</p> <p>_____</p>	<p><b>Character</b> 1 2 3 4 5</p> <p>COMMENTS: _____</p> <p>_____</p>
<p><b>Leadership</b> 1 2 3 4 5</p> <p>COMMENTS: _____</p> <p>_____</p>	<p><b>Academically Oriented</b> 1 2 3 4 5</p> <p>COMMENTS: _____</p> <p>_____</p>
<p><b>Conduct</b> 1 2 3 4 5</p> <p>COMMENTS: _____</p> <p>_____</p>	<p><b>Ability to get along with peers</b> 1 2 3 4 5</p> <p>COMMENTS: _____</p> <p>_____</p>
<p><b>Enthusiasm</b> 1 2 3 4 5</p> <p>COMMENTS: _____</p> <p>_____</p>	<p><b>Ability to take constructive criticism</b> 1 2 3 4 5</p> <p>COMMENTS: _____</p> <p>_____</p>
<p><b>Attends School Regularly</b> 1 2 3 4 5</p> <p>COMMENTS: _____</p> <p>_____</p>	<p><b>On time to class</b> 1 2 3 4 5</p> <p>COMMENTS: _____</p> <p>_____</p>

\_\_\_\_\_  
Teacher's Signature

\_\_\_\_\_  
Teacher's Name

Please send the recommendation over to Mr. Gaby Torres via email by Wednesday, April 22nd. Thanks again!  
[torres.gabriel@brevardschools.org](mailto:torres.gabriel@brevardschools.org)

**OTHER COMMENTS:**

# STUDENT RECOMMENDATION

(three are needed)

\_\_\_\_\_ is applying for Student Government for the 2020-2021 school year. Please take a few minutes to evaluate the above named student. The scale is 1 to 5, with 5 being the highest and one being the lowest. **Please explain in the comments line your reason for their evaluation.** It may help to consider this from a club teammate's point of view.

*Would you want this student on your team?*

These forms will be kept confidential. Please DO NOT return them to the student. **Please send the recommendation over to Mr. Gaby Torres** via email, [torres.gabriel@brevardschools.org](mailto:torres.gabriel@brevardschools.org). Thank you for your time and consideration!

<p><b>Responsibility</b> 1 2 3 4 5</p> <p>COMMENTS: _____</p> <p>_____</p>	<p><b>Character</b> 1 2 3 4 5</p> <p>COMMENTS: _____</p> <p>_____</p>
<p><b>Leadership</b> 1 2 3 4 5</p> <p>COMMENTS: _____</p> <p>_____</p>	<p><b>Academically Oriented</b> 1 2 3 4 5</p> <p>COMMENTS: _____</p> <p>_____</p>
<p><b>Conduct</b> 1 2 3 4 5</p> <p>COMMENTS: _____</p> <p>_____</p>	<p><b>Ability to get along with peers</b> 1 2 3 4 5</p> <p>COMMENTS: _____</p> <p>_____</p>
<p><b>Enthusiasm</b> 1 2 3 4 5</p> <p>COMMENTS: _____</p> <p>_____</p>	<p><b>Ability to take constructive criticism</b> 1 2 3 4 5</p> <p>COMMENTS: _____</p> <p>_____</p>

\_\_\_\_\_  
Student Evaluator's Signature

\_\_\_\_\_  
Student Evaluator's Name

Please send the recommendation over to **Mr. Gaby Torres** via email by Wednesday, April 22nd. Thanks again!  
([torres.gabriel@brevardschools.org](mailto:torres.gabriel@brevardschools.org))

**OTHER COMMENTS:**