



Tapply Thompson



Teen Council

APPLICATION

Return completed application to Gina or drop off at TTCC by September 14th

Name: _____ Age: _____ Grade: _____

Email address :(can't not be a school one) _____

Phone #’er: _____ Best way to get in touch with you: SnapChat Text Email Facebook

Why do you want to become a member of the TTCC Teen Council?

What are some programs, activities, or issues you would like to see TTCC Teen Council address?

What are some of your strengths you could contribute to the TTCC Teen Council?

Do you participate in any extracurricular activities ? Sports, Band, Etc.

I understand the requirements and expectations of the TTCC Teen Council member. I understand I must interact with TTCC Teen Council members, TTCC staff, and the general public in a respectful manner, if I fail to do so, I will be asked to leave the TTCC Teen Council board.

Applicant Signature: _____ Date: _____

Parent Signature: _____ Date: _____