

LAGUNA BEACH HIGH SCHOOL ASSOCIATED STUDENT BODY

Dear ASB Applicants,

Thank you for your interest in applying for the Associated Student Body! Being a part of ASB is an important job that requires a lot of time, effort, dedication and responsibility. It is also very rewarding: giving you great memories, opportunities to have fun, and allows you to get involved in the school and the decisions that affect every student.



Please read this packet carefully. If you have any questions, please email Mr. Finn (sfinn@lbusd.org) or Mrs. Lundblad (jlundblad@lbusd.org) in the activities office. Be sure you know the deadlines and meet them. Thank you for supporting your student body and good luck!

Sincerely,
Scott Finn & Jenn Lundblad
Activities Directors

ASB Appointees will have the opportunity to assist with all the following commissioner committees:

Commissioners of Activities & Events,
Athletics, Clubs, Community Activities &
Service, Decoration & Artistry, Elections &
Public Opinion, Publicity & Media, and
Technology

Wednesday, April 17th: Application due.
Packets Due by 3:00 PM to the Activities Office.

Week of April 20th - 24th: Interviews
You will be contacted with your interview time.

Friday, April 24th: Results Posted
*Results will be posted at the activities office
window by 3:00pm*

*If you are not selected, you may run for
Freshman President in the Fall or represent
your 3rd period class in the Student Senate.*

ASB Appointed Positions Checklist

- Application & Recommendations
- ASB Candidate Questionnaire
- ASB Code of Conduct

***Incomplete or late applications will
not be accepted***

****RETURN THIS WITH YOUR APPLICATION****

Applicant Verification

Name: _____

Cell: () _____

Email address: _____

APPLICANT VERIFICATION INFORMATION:

You must get verification of your behavior, attendance, and academic performances **BEFORE** you submit your application. **Remember, you need to budget time for signatures in case the offices are busy.**

Please verify that the student's total GPA is a 2.5 or higher. Must also verify that attendance is in good standing and may not have any demerits to run for ASB.

_____ Principal Signature	_____ Date
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Academic Performance	
_____ Counselor Signature	_____ Date

Behavior and Attendance	
_____ Asst. Principal Signature	_____ Date

Verification of Completion

****RETURN THIS WITH YOUR ELECTION APPLICATION****

Student: I have reviewed the terms outlined in this election packet. I have read through and understand the responsibilities and roles of the position I am running for. I am aware of the guidelines, due dates, and expectations associated with this campaign and leadership opportunity.

Student (Applicant Signature)

DATE

Parent/Guardian: I am aware that my student is pursuing the opportunity to run a campaign (elected positions) and/or interview for a position (appointed position) with ASB at LBHS. We are aware of the guidelines, due dates, and expectations associated with this leadership opportunity.

PARENT/ GUARDIAN NAME (PLEASE PRINT)

CONTACT PHONE

PARENT/ GUARDIAN NAME (PLEASE PRINT)

**** Keep this page for reference ****

ASB Code of Conduct

I, _____, do solemnly swear that I will abide by the following Code of Conduct set forth by the Laguna Beach High School ASB student government and constitution. The following standards of eligibility, conduct, and responsibilities shall apply to all members during their term of office. The term of office shall run from July 1 until the last day of the given school year.

I. Academic Achievement

- A. I will maintain an academic total 2.5 grade point average computed on a 4.0 scale.
- B. I will maintain at least a total 2.5 GPA with no failures and no unsatisfactory throughout the entire term of office. If I receive less than a total 2.5 GPA, I understand that I will be placed on probation and removed from class activities. If the total GPA does not reach a 2.5 by the next grading period, I understand that I may lose my position in ASB and be removed from the class.
- C. I understand I may be asked to submit a record of my scholastic achievements to the Activities Director at the end of each grading period.

II. Behavioral Standards

- A. **As a member of ASB, I realize that my conduct must be beyond reproach at all times, on and off campus.** *(It is critical that you understand the full implications of this statement. Ask Mr. Finn or Mrs. Lundblad if you need further explanation).*
- B. I will uphold the constitution and my oath of office
- C. I will cooperate with and support the ASB President and Activities Director.
- D. I will abide by school dress regulations at all times.
- E. I will not carry nor use any illegal chemical substances or stimulants, drugs, alcohol, etc. at any time, on and off campus.
- F. I will display good sportsmanship at all times and serve as an ambassador for Laguna Beach High School at other schools.
- G. I will maintain a satisfactory citizenship record. No unsatisfactory ratings will be acceptable.
- H. I understand if I am suspended for any reason, I can be permanently removed from ASB.
- I. Failure to comply with any of these rules may result in immediate removal from office as determined by the LBHS Administration Team.

**** Keep this page for reference ****

III. Responsibilities of Office

A. Summer Obligations

1. I understand that I am responsible for attendance at ASB camp during the summer **(August 4-7 University of California at Santa Barbara - Santa Barbara)**.
2. I understand that I am responsible for attending all ASB meetings during the summer for the new school year **(beginning in August)**.
3. I understand that I am responsible for attendance at Freshman Orientation **(end of August)**.
4. I understand that I am responsible for all summer reading and corresponding assignments and that this will be a part of my grade (when applicable).

B. Regular School Year

1. I understand that it is my responsibility to work on projects assigned to me during work periods and by the Constitution.
2. I understand that I will be assigned work tasks at **all** ASB functions and that it is my responsibility to work at these events and stay until the end. Officers who miss several functions could be placed on probation and/or be dismissed administratively by the Activities Director.
3. I understand that if I am selected, I must be enrolled in Student Leadership Class.
4. I understand that I am responsible for all my duties enumerated in the ASB Constitution of LBHS ASB regarding my office.
5. I understand that I will be assigned tasks by the ASB President and/or Activities Director that may at times have no bearing on my office and that I will carry them out to the best of my ability.
6. I understand that I must adhere to the LBHS code of conduct at all times (24/7: including weekends and after-school hours). Additionally, if at any time during my tenure of office, I am found guilty of being directly involved in any of the following offenses: possession of alcohol or drugs, theft, vandalism, fighting, plagiarism or forgery of a note, I will be declared ineligible to carry out the duties of my office and will be removed from the leadership class with a grade of WF.
7. I will honor my position, my school, my family and myself by taking this commitment seriously. I understand that with my position, comes a higher expectation and a commitment outside the classroom. I am willing to do my best to make the necessary sacrifices. Should I neglect my position and/or duties related to ASB during my tenure in office, I may be asked to resign and be placed in another class with a "No Grade" for the remainder of the semester.

**** Keep this page for reference ****

IV. GRADING PROCEDURE

- C. I understand that my grade in the student leadership course will reflect my ability to deal with the stated requirements.
- D. I understand that my grade will be evaluated in a joint discussion between the Assistant Principal, Activities Director, and ASB Leadership.
- E. I understand that I will be responsible for assignments in class and outside of class. Failure to complete an assignment will negatively affect my grade.

Cover Page

(Please return with your application)

Name: _____

Cell: () _____

Email address: _____

Acknowledgement of ASB Code of Conduct

_____ *student signature*

Applicant Verification

ASB Questionnaire

Teacher Evaluation

Please list the teachers that you have given your evaluation form to.

1. _____

2. _____

TEACHER EVALUATION FORM

ASB Candidate

Teachers,

Please complete this confidential evaluation of the candidate in each of the categories listed. I appreciate the time that you spend preparing for your classes and the extra effort that this takes, but please understand the importance of this document to the students who have asked for your recommendation. **This evaluation is due no later than Wednesday, April 17th.** These recommendations are not shared with the candidates. Your confidentiality is protected.

Thank you,
Scott Finn & Jenn Lundblad
 LBHS Activities Director
 625 Park Ave
 Laguna Beach, CA 92677

Student:	Circle One					
	Low				High	
Student consistently turns in work completed and on time.	1	2	3	4	5	N/A
Student puts in effort to turn in quality work.	1	2	3	4	5	N/A
Student is enthusiastic about being a student here at LBHS.	1	2	3	4	5	N/A
Student pays close attention to detail.	1	2	3	4	5	N/A
Student is punctual.	1	2	3	4	5	N/A
Student works on their own without constant supervision.	1	2	3	4	5	N/A
Student works well with people of authority.	1	2	3	4	5	N/A
Student is proficient as a self-advocate.	1	2	3	4	5	N/A
Student demonstrates strong listening skills.	1	2	3	4	5	N/A
Student works well on a team and is willing to share different roles.	1	2	3	4	5	N/A
Student is a creative thinker, can see a bigger picture and comes up with new ideas to solve problems.	1	2	3	4	5	N/A
Student is willing to assist others without thought of personal gain.	1	2	3	4	5	N/A

Comments:

Evaluated by: _____

(teacher name)

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(teacher name)