



Erin Bailey
Assistant Superintendent
Elementary

Gary Highsmith
Superintendent

Linda Tran
Assistant Superintendent
Secondary

Hamden Student Representative Application **Parental Consent**

I confirm that I _____ am the parent/legal guardian
of _____.

By signing this application, I give my child permission to be considered for, and if selected, to serve as the Student Representative to the Hamden Board of Education.

Name: *(please print)* _____

Signature _____

Date _____