



LITTLE EGYPT DISTRICT OF STUDENT COUNCILS

Little Egypt District of Student Councils

Official Credentials Committee Application Form

(Please make as many copies as necessary)

Due 1/8/23

Name: _____

School: _____

School Phone: _____

City/Zip: _____

List all duties and activities you have actively organized or participated in on the student council.
If needed, attach another sheet.

Please explain to the LEDSC executive board what positive and insightful qualities you could bring to the Credentials Committee.



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Applicant's Signature: _____ Date: _____

Advisor's Signature _____ Date _____

Principal's Signature _____ Date _____