



Student Commission Application Form

We Share. We Serve. We Shine.

We share resources to serve each other and help all of us shine together.

Your Purpose. Your Passion. Your Potential.

We help you to define your purpose, discover your passion, and maximize your potential.

PROGRAM DESCRIPTION

Our program focuses on helping you discover and develop your unique voice through discussion, presentation, project initiation, and community involvement. We foster an environment to promote cooperation and teamwork rather than comparison and competition.

You will be supported by a network of diverse and accomplished adults who provide personal attention, feedback, and guidance throughout your leadership journey with us. We encourage you to define your constructive definition of purpose to lead and live without self-imposed limitations.

We encourage you to reach out to numerous and various groups, institutions, races, and religions to identify commonalities and appreciate the differences to initiate innovative ideas and projects to flourish the individual, community, and society.

We are a community of builders and doers who seek to participate in our community and contribute to community progress. We give you opportunities and resources to pioneer new initiatives to further cultivate community harmony and prosperity.

PROGRAM ELIGIBILITY

- A. Must be a 7th to 12th grade student.
- B. Have an interest in initiating or participating in projects.
- C. Want to improve communication and public speaking skills.
- D. Be willing to be challenged.
- E. Mail the completed form to ExecDirector@lwpfdn.org.

APPLICATION EVALUATION

Your application will be reviewed upon receipt of it. An interview will be conducted, and we reserves the right to refuse service to any student who speaks or behaves improperly.

Student Information

Name		Grade in fall
Home Address		
Phone	(Home)	(Cell)
E-Mail Address		School Name

6 Adjectives to Describe Your Strengths by You

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6 Adjectives to Describe Your Weaknesses by You

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6 Adjectives to Describe You by Your Peers

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Special Skills or Qualifications (minimum 200 words)

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Reasons for Submitting the Application (minimum 200 words)

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Guardian Information

Guardian 1 Name		Guardian 2 Name	
Occupation		Occupation	
Email Address		Email Address	
Cell Phone		Cell Phone	

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are accurate and complete. I understand that if I am accepted as a student commissioner, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

I consent and authorize LWPF or any entity authorized by LWPF to copyright, use, and publish any of the images in any format taken of me on this day. I understand these images may be used for various purposes and may appear on the LWPF website or social media pages. I also understand that LWPF or any entity authorized by LWPF will use the images exclusively for LWPF-related purposes and not for any commercial gain.

Since anyone can download an image from the Internet or make copies of printed materials, I agree that LWPF is not responsible for the unauthorized use of the images. I am aware that I am not entitled to compensation and that the images may appear with or without my name.

I acknowledge that I have read and understood the terms above by signing below.

Student Name (printed)	Signature	Date
Guardian Name (printed)	Signature	Date

Our Policy

The LWPF's policy provides equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

Please email all questions to ExecDirector@lwpfdn.org or refer to our website at lwpfdn.org.