

ECC STUDENT GREEN TEAM APPLICATION

Thanks for your interest in the ECC Green Team! Please fill out this application to be part of the 2011-12 Green Team at ECC and return it to your teacher.

First and Last Name: _____

Teacher's Name: _____

Write a paragraph telling why you want to be part of the Green Team.

Please circle the days you would be available.

___ I am available before school to volunteer on M T W TH F

___ I am available after school to volunteer on M T W TH F

___ I would like to volunteer for Green Team activities during my lunch time. M T W TH F

Yes, I recommend this child for the ECC Green Team.

Teacher Signature

Yes, my child has permission to be part of the ECC Green Team.

Parent Signature
