Minister’s Student Advisory Council

What is it?
The Minister’s Student Advisory Council is a group of 60 students from across the province. These students share their ideas and provide advice to the minister on how to make Ontario’s schools the best in the world. It’s a place where students have a voice and where they will be heard.

The council is about empowering students to ‘be the change’ they want to see. It’s a place where a small group of people can think big and take action to help all students across the province.

Youth don’t have to wait until tomorrow to be leaders today. They have a voice and want to use their energy and ideas towards making the world a better place.

What is involved?
The council meets twice a year for one day of meetings in Toronto to provide the student perspective and advice to the Minister of Education. Students will also give their input on websites, DVDs, brochures and other marketing materials we’re creating. They just need to bring their ideas and be ready to participate.

Students are asked to commit to be a member for a minimum of one year and a maximum of two years. In addition to attending the council meetings, they will also participate in a regional forum on student voice. Travel, meal and accommodation expenses and the forum are covered for the student and an adult supervisor.

Who can apply?
Students from Ontario’s publicly funded schools who are in grades 7 to 12 can apply to become a member of the Minister’s Student Advisory Council. No special qualifications are required. The council celebrates student diversity. All students are welcome and encouraged to apply. Just fill out an application and let us know what makes you the special person you are.

What are the next steps?
You can help make a difference. Applications to join are due Friday, November 28, 2008. The first meeting will happen in spring 2009.

Questions?
Still have a question? Email us at studentengagement@ontario.ca
Please read the following information before completing your application.

**ELIGIBILITY REQUIREMENT:**
- Open to all students in Ontario’s publicly funded schools in grades 7 to 12.

**TIME COMMITMENT AND MEETING DETAILS:**
- The council meets with the Minister of Education for one day twice a year (spring and fall) in Toronto.
- Students are asked to commit for a minimum of one year and a maximum of two years.
- Travel may be required to attend these meetings (some school boards have videoconferencing facilities). Each student will be accompanied by a teacher/supervisor. All accommodation, food and transportation costs are covered by the Ministry of Education.
- Council members will also participate in a regional forum on student voice.

**NOTICE OF COLLECTION:**

**Minister’s Student Advisory Council**

Your personal information provided on this application and in all other communications related to this application is used by the ministry to select and appoint the members of the Minister’s Student Advisory Council. If you are selected as a member, your principal will be notified and by signing this application you are consenting to the disclosure of your selection and appointment to your principal. The ministry will not use or disclose your personal information for any other purpose unless you give your consent or unless required by law.

Your personal information is collected under the authority of ss. 8.1 and 10(a) of the Education Act, R.S.O. 1990, c. E.2, as amended.

If you have any questions about the collection of your personal information, you may contact:

**Director, Student Success/Learning to 18 Implementation, Training and Evaluation Branch**
Ministry of Education
900 Bay Street, Mowat Block, 4th Floor
Toronto, Ontario M7A 1L2
Phone: 416-326-9369
SECTION 1

PERSONAL INFORMATION

☐ Male  ☐ Female

First name: ________________________________________________

Last name: ________________________________________________

Mailing address (home): ____________________________________

City: ___________  Province: _________  Postal code: _________

E-mail address: ____________________________________________

Date of birth: _____________________________________________

School name: ______________________________________________

Grade: ____________________________________________________

Please check the applicable box. I can commit for:  ☐ One year  ☐ Two years

SECTION 2

TELL US ABOUT YOURSELF

Your responses to the following questions help us get to know you a bit better.

Please limit your answers to 100 words for each question, and submit them on a separate sheet of paper.

1. How do you think you can make a difference and why?
2. What perspectives or diversity issues would you be interested in representing on the Minister’s Student Advisory Council?
3. What accomplishment are you most proud of and why?
4. Think about an issue you are passionate about. Why is this issue important to you?
5. What else do you think we should know about you?
6. What do you think might help you want to get more involved at school? If you are already active in school life, please tell us about your involvement.
SECTION 3

PARENTAL/GUARDIAN CONSENT AND ENDORSEMENT (MANDATORY)
If you are under 18 years of age please have your parent or guardian fill out the following:

Name of parent/guardian: ___________________________________________________

Signature: __________________________________________________________________
(I support this application)

TEACHER CONTACT (OPTIONAL)
Please have a teacher from your school fill out the following:

Name of teacher: ___________________________________________________________

Signature: __________________________________________________________________
(I support this application)

PRINCIPAL (MANDATORY)
Please have your school principal fill out the following:

Name of principal: __________________________________________________________

School address: _____________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

School phone number: ______________________________________________________

Signature: __________________________________________________________________
(I support this application)

Note to principals:
Please forward all completed applications to your board’s Student Success Leader.