



École Secondaire Robert A. McMath Secondary School

4251 Garry Street, Richmond, British Columbia, V7E 2T9 - T: (604) 718-4050 - F: (604) 718-4051
Email: mcmath@sd38.bc.ca Website: mcmath.sd38.bc.ca

Leadership Application Form 2025 – 2026

*This form is for **NEW** Leadership applicants only*

Return this completed application with your program planning sheet. For more information, please see Mr. Hass.

Name of Student: _____ Grade: _____ Student Number: _____

E-mail Address: _____

Candidate selection will be based on the following criteria (in no particular order):

- ✓ Self-motivation
- ✓ Excellent attendance & punctuality
- ✓ Possess strong work ethic in all classes
- ✓ General positive behavior and attitude
- ✓ Can work as an integral member of a team
- ✓ Socially responsible member in the school and community
- ✓ Have the following attributes: dependable, responsible, honest, diligent
- ✓ Willing to commit extra time for volunteer opportunities and event planning

1. In 5 sentences or less, tell us why you are a strong candidate for our Leadership program?

2. What are some activities/interests you wish to pursue in Leadership next year?



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Teacher Recommendation for the McMath Leadership Program

If you have any questions, please contact Mr. Hass. Thank you kindly for your time!

Criteria to be in Leadership:

- Strong work ethic
- Excellent academic record
- Consistent attendance and punctuality
- Participating member of class
- Ability to work collaboratively with peers
- Proficient management and organizational skills
- Demonstration of initiative
- Demonstrates enthusiasm in a variety of activities and pursuits
- Reliable, responsible, confident, and mature student

Two (2) teacher signatures are required to confirm that you meet the above criteria.

Reference #1

I strongly recommend _____ be considered for our McMath Leadership Program.
(student name)

Additional Comments: _____

Teacher name: _____ Signature: _____

Reference #2

I strongly recommend _____ be considered for our McMath Leadership Program.
(student name)

Additional Comments: _____

Teacher name: _____ Signature: _____