



Dear Prospective DNHS PLUS Team Member:

Thank you for applying to be a PLUS Team Member at *Del Norte High School* and for the *Poway Unified School District*. The position of a PLUS Team Member is a serious, highly regarded appointment. Members of the PLUS Team work throughout the District and DNHS with students and staff in an effort to develop an understanding of *who we are* rather than what we are. The following are the club code of ethics and obligations that every member must follow.

Contract of Responsibilities

As a student enrolled in the Del Norte High School PLUS Program, I agree to follow the rules and policies established to govern the PLUS Program. I understand the following and accept as my personal code of ethics.

1. **Dignity** – I will respect the dignity and individuality of the people I encounter during my tenure in the PLUS Program.
2. **Confidentiality** – I will respect the confidentiality of the helping relationships that I engage in as a PLUS Program member.
3. **Duty to Inform** – I understand that I have a duty to inform an adult supervisor about any situations regarding potential or suspected suicide attempts, abuse, threatened violence, or homicide.
4. **Supervision** – I understand I will be supervised by a variety of adults and agree to follow the guidance that is offered in supervision.
5. **School Policy** – I understand that all school policy must be followed, and if I neglect to follow the school policies, it could result in termination from the PLUS Program.
6. **Honesty** – I understand the importance of being honest and will not be dishonest to benefit other students on this campus, as well as myself.
7. **Leadership** – I understand that I am a leader in this program and will strive to lead in a positive way both on and off the Del Norte campus.

Obligations

1. **Dates and Dues**- The retreat will take place Thurs. **September 27th** and Fri. **September 28th**, 2018. The cost will be \$150, of which \$100 is due by June 1, 2018. Financial assistance is available.
2. **3 Strike Policy**- There will be a 3 strike policy for club meetings at school. Attendance will be taken at every meeting, so if one does not email (delnorteplus@gmail.com) of their absence, the 3 strike policy will be placed into effect.
3. **Participation**- Members will actively participate with my small group throughout the year. It is incredibly important that participation takes place. What one gains from PLUS goes as far as the effort one puts in.
4. **Contribution**- Members will proactively contribute their ideas and time. PLUS does not stop at just the retreat, activities and events will be held throughout the year. Therefore it is that crucial club members have ideas and opinions regarding how PLUS can contribute at Del Norte.

I understand and agree to the above responsibilities and obligations as my code of ethics as a member of the Del Norte High School PLUS Program:

Print Name: _____
Signature: _____ Date: _____

Checklist

1. ____ Code of Ethics
2. ____ PLUS Team Application Questionnaire
3. ____ Counselor/Assistant Principal, and Parent/Guardian Signatures
4. ____ One page autobiography
5. ____ Teacher recommendation (1)
6. ____ Completed online Google Form
(https://docs.google.com/forms/d/e/1FAIpQLSfgyVcoPFZ6UoFZok8VyC2K5HG693xwK_y5VAdys10Q_dRkmw/viewform) (access link from online file)
7. ____ Submit packet and complete Google Form by Friday, **May 18, 2018** (deadline)

Del Norte Peer Leaders Team Member Application

(2018-2019) Please *PRINT/TYPE* Answers

Name: _____ Grade (upcoming year): _____
Gender: _____ Cell Phone: _____ Your E-mail: _____
Address: _____ City: _____ Zip: _____
Home Phone: _____
Languages Spoken: _____ How long have you attended Del Norte HS? _____

What compels you to join Del Norte PLUS? Why should we accept you?

If you could change one thing about our school what would that be? Why?

Can we count on you to actively participate and contribute to the club throughout the **year**? Why? What other commitments (sports, clubs, etc.) are you involved in?

(For returning members only) Reflect on a Peer Leaders activity from this year. Provide one idea for an event that we can hold to further improve the positive impact we can have on our campus.

Check box if you wish to become a “group leader” (Upper Classmen Only)

- By checking this box, you are committing to:
 - Organizing monthly small group meetings
 - Facilitating ongoing communication within your small group
 - Ensuring that what is said in your small group, **stays** in your small group
 - Attending and recording attendance at meetings
 - You will set an example and carry out the code of ethics (see page 1)

- Just because you check this box **does not** mean you will be a group leader this upcoming year. The current PLUS leadership administration will base each candidacy off of their application as well as **an interview**. Interviews will occur during the end of the 2017-2018 school year.

****Write a one-page autobiography that tells us about you. Include qualities or experiences you have that may benefit students on this campus.** (Use the back of this page or type on a separate sheet of paper)

The following signatures must be obtained:

Applicant's Name:

1. Attendance/Conduct – *Counselor/Assistant Principal*

I certify that the above applicant has regular attendance and demonstrates good citizenship on campus, and is qualified for membership in the PLUS Program.

_____ Counselor/Assistant Principal

2. One *Teacher* Recommendation: Please write the name of the teacher that we may contact.

Name: _____

Signature: _____

3. *Parent / Guardian*

- I realize that my child will be required to attend the retreat (**September 27th and 28th, 2018**) as this is prerequisite to becoming a member.
- Fees for the retreat are \$150, with \$100 due by **June 1, 2018**. Financial assistance is available to those in need.
- The remainder of the dues will be collected before the retreat, during the 2018-2019 school year.
- Membership in this program is a privilege. If at any time your child violates the code of ethics or does not fulfill their obligations and responsibilities, their membership may be revoked.

Name: _____

Signature: _____

**PLUS Team Member
Teacher Recommendation**

_____ is applying to be a PLUS Team member for the 2018-2019 academic year. Your recommendation is a key factor in our consideration of this application. Thank you for taking the time to complete this recommendation. It should be returned to the box of **Mr. Roty, Counselor.**

Please rate the applicant on the following characteristics. PLUS Team Members need to understand the importance of responsibility and confidentiality that entails this position. Your carefully considered response is of the utmost importance to our program.

Poor ----- 0 1 2 3 4 5 6 ----- Excellent

Approachable	0 1 2 3 4 5 6
Honest	0 1 2 3 4 5 6
Self Directed	0 1 2 3 4 5 6
Committed	0 1 2 3 4 5 6
Empathetic	0 1 2 3 4 5 6
Supportive	0 1 2 3 4 5 6
Attendance & Punctuality	0 1 2 3 4 5 6
Leadership	0 1 2 3 4 5 6
Initiative	0 1 2 3 4 5 6
Relations with peers	0 1 2 3 4 5 6
Overall Recommendation	0 1 2 3 4 5 6
Comments	

Name of Teacher: _____ **Signature:** _____ **Date:** _____