San Benito Consolidated Independent School District

INVOCATION

For the Regular Meeting of the Board of Trustees

(PLEASE TYPE)

Meeting Date: _____

Campus: _____

Student's Name: _____

Please include the following information in the student's biography:

- ❑ Student's name
- ❑ Grade
- ❑ Age
- ❑ Favorite Subject
- ❑ Hobbies
- ❑ Accomplishments
- ❑ Parents' Names
- ❑ Other pertinent information

STUDENT BIOGRAPHY:

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RETURN COMPLETED FORM TO: Isabel C. González, Interim Director of Public Relations
San Benito CISD Communications Department / KSBG TV
(956) 276-6030 • icgonzalez@sbcisd.net

The San Benito Consolidated Independent School District does not discriminate on the basis of race, color, national origin, sex or handicap in its educational and vocational programs, services or activities as required by Title VI of the Civil Rights Act of 1964, as amended; Title IX of the Education Amendments of 1972; and Section 504 of the Rehabilitation Act of 1973, as amended.