

## Student Council Report

NAME \_\_\_\_\_  
DATE \_\_\_\_\_

Please complete this form each week and return to Mrs. Angie every Thursday.

1. I have spent time in prayer and the word (*Please check each day this statement is true* )

\_\_\_\_\_ Sunday  
\_\_\_\_\_ Monday  
\_\_\_\_\_ Tuesday  
\_\_\_\_\_ Wednesday

\_\_\_\_\_ Thursday  
\_\_\_\_\_ Friday  
\_\_\_\_\_ Saturday

2. This week I believe God has spoken to me the following:

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3. As a response to what God has spoken I will:

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4. The following items were my student council assignments for this week:

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5. I have completed the following student council assignments given to me:

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6. I have communicated with my class the following information this week:

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7. My class has requested I communicate the following things to the student council on behalf of them.

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8. The attitude of the student body I interact with each day is: (*circle the attitude which best describes those you interact with each day*).

*Very Positive      Positive      Indifferent      Somewhat Poor      Very Poor*

I attribute this attitude to:

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9. I believe the following should happen in order to make FCS a better school for all students.

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Additional Comments:

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