

## **KBE Non-Voting Student Member**

## **School Support Statement**

Having read and understood the duties, time comm	nitment, and benefits of student membership on the
Kentucky Board of Education, and as Principal of	, I agree
that if	_ (student name) is selected as a student member
on the Kentucky Board of Education that he/she has	s my permission and support to participate in this
extended educational opportunity.	
Signed by:	
Principal/Date	