`

Maaungoodhoo School

Sh. Maaungoodhoo

**APPLICATION FOR PREFECTSHIP**

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| --- | --- |
| Full Name: | |
| Permanent Address: | Index Number: |
| Present Address | Current Grade: |
| Number of year(s) studied in this school (including this year): | |
| Number of year(s) you have served as a junior/ senior/ head prefect/ deputy prefect in this school: | |

**Tick the following;**

For prefect ship I have / had:

Newly applied: 1 year experience: More than 1 year experience:

**Mention the activities participated in the year 2020:**

|  |  |
| --- | --- |
| Academic activities | Sports related activities |
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| --- | --- | --- | --- | --- | --- |
| Number of “Fully Achieved” Outcomes: |  | Total no. of Outcomes: |  | Percentage of “FA” Outcomes: |  |
|  | | | | | |
| Academic Achievements (if any) 2020; | | | | | |
| Sports Achievements (if any) 2020; | | | | | |
| Post (s) you have served 2020; | | | | | |

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| --- | --- |
| **Prefect Declaration** | |
| I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ solemnly promise that I will be loyal and dedicated to the school and discharge the duties and responsibilities entrusted to me with utmost sincerity and honesty to the prefect ship in the event of satisfaction of the school. I understand that the school holds the authority to deprive of the prefect ship in the event of unsatisfactory discharge of duties. | |
| Date: | Signature: |

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| **FOR OFFICIAL USE** | | |
| **Received by;** | Name: | Signature: |
| Designation: |
| Date / Time: |

|  |  |  |  |
| --- | --- | --- | --- |
| **FOR THE USE OF PREFECT SELECTION BOARD** | | | |
| **Academic (50%)** | **Discipline & Leadership (50%)** | | **Total (100%)** |
|  |  | |  |
| Selected: Rejected:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ can / cannon be considered for prefectship. | | | |
| **Prefect Board In charge;**  Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Designation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | **Authorised by;**  Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Designation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |