

SUN SHINE Election 2082

Teacher Endorsement Form

Candidate Name: _____

Class/Grade: _____

Position Applying For: _____

School Name: _____

☐ **To Be Filled by the Endorsing Teacher:**

Teacher Name: _____

Subject/Position: _____

Contact (Email/Phone): _____

Relationship to Candidate:

- ☐ Class Teacher
- ☐ Subject Teacher
- ☐ Club/Activity Advisor
- ☐ Other: _____

☐ **Endorsement Statement:**

Please provide a brief statement (3–5 sentences) explaining why you endorse this student for the elected position.

Teacher Signature: _____

Date: _____

☐ **Instructions:**

- This form must be submitted along with the candidate's nomination documents.
- Endorsement must come from a current teacher or school staff member.
- Forms without a signature or statement will be considered invalid.