



STUDENT OATH OF OFFICE

I,	, accept the duties and responsibilities of		
the office of	for the	Student Association	
of La Sierra Academy for the 2020) school year.	By accepting this office, I	
understand that I will, through my leadership and by my actions, uphold the			
principles (spiritually, socially & academically) of La Sierra Academy. I accept			
this responsibility through my own ch	noice.		

In the event I do not perform my duties as stipulated in the job description for class officers, violate any school rules and expectations as outlined in the Student Handbook, or violate any public laws I may be removed from office.

Student Signature

Date

Parent Signature

Date

Sponsor Signature

Date

SA OFFICE PROBATION

from office immediately. * Student Signature Date Sponsors Signature Date	
Sponsors Signature Date	
Administrators Signature Date	
Copy in Discipline File Copy to Student Copy to Sponsor LSA Of	fice Copy Original to Pare