



SMMHS PTSA

Board Interest Form

Name: _____

Contact Info: Phone: _____

Email: _____

Board Position(s) of Interest: Pres-Elect ____ Secretary ____

Treasurer ____ VP Membership ____ VP MEF ____

VP Communication ____ Board of Managers _____

Have you served on the PTSA Board previously? Yes ____ No ____

If yes, when? _____ In what role(s)? _____

Will you be able to attend monthly board meetings during school hours?

Yes ____ No ____ Time preferred _____

Will you be serving on other SMMHS boards during the 2016-2017 school year?

Yes ____ No ____

If yes, which board(s)? _____

Child(ren) at SMMHS: Name: _____

Grade: _____

Name: _____

Grade: _____

Name: _____

Grade: _____

SMMHS activities in which your children participate: Athletics ____

Music ____ Theater ____ IB ____ Clubs ____

Other _____

*Please return to the PTSA box in the school office.