



**Austin Independent School District  
Standard Application Form for Service on Campus Advisory Bodies (CACs)**

*If you are completing this form electronically, please click on the gray text fields and type in text where requested, or click on the gray check boxes that are applicable and an "X" will appear. The form will expand as text is entered.*

*If you are completing this form by hand, please **print** all information.*

*For more information on CACs, including CAC bylaws: <http://www.austinisd.org/advisory-bodies/cac>*

**Date:**

**Your Name:**

**Your Primary Residence**

**Street Address:**

**City:**

**Zip Code:**

**Preferred Email Address:**

**Preferred Daytime Telephone Number:**

**Name of School (CAC on Which You Wish to Serve):**

*The following CAC membership criteria apply:*

- *Parents must live within the district, and must be a custodial parent or guardian of a student currently enrolled in the school indicated above. Parents may not also be AISD employees.*
- *Community members must live within the district. Community members may not also be parents or AISD employees, and must be at least 18 years of age.*
- *Business representatives need not live or work within the district. Business representatives may also be parents.*

**Based on the above criteria, please select one of the following CAC membership categories:**

- ☐ I am a Parent  
☐ I am a Community Member  
☐ I am a Business Representative

**Please describe any current or previous school-related service (e.g., district-level committee, CAC, PTA, volunteer, tutor, mentor):**

**Please describe any other current or previous community service:**

AISD recognizes and supports the concept of balanced representation in regard to filling vacancies on district advisory bodies. To this end, every effort is made to appoint members who represent the diversity of our community.

**Please provide the following information about yourself:**

**Gender:**

**Ethnicity:**

**Please describe why you are interested in serving on the CAC you indicated:**

*Although not required, you are encouraged to attach written references to this form in support of your membership.*

*I have attached the following number of written references to this form:*

**Please acknowledge that you understand each of the following: :**

- ☐ Submittal of this application does not in itself guarantee CAC membership, but my application will be considered
- ☐ The CAC meets at least eight times during the school year
- ☐ CAC membership is a two-year commitment (unless serving a partial term)
- ☐ If accepted, I am expected to comply with CAC bylaws, including reasonably regular attendance and member conduct
- ☐ The CAC is an advisory body, and the principal has ultimate decision-making authority for the campus

**PLEASE SUBMIT THIS COMPLETED FORM DIRECTLY TO THE CAMPUS OFFICE**