

Measure H Citizens Oversight Committee | **APPLICATION FORM**

Please type or print legibly.

Name _____

Email _____

Home Telephone _____ Fax Number _____

Home Address:

Street _____ City & Zip _____

EMPLOYMENT INFORMATION

Name of Employer (or "self-employed") _____ Occupation _____

Work Address _____ City & Zip _____

Work Telephone _____ Work Email _____

COMMITTEE MEMBERSHIP POSITION(S) YOU ARE QUALIFIED TO FILL.

The California Education Code requires that the Committee have at least one member representing each of the first five categories. Please specify to which category you belong, and check all that apply.

- Active in a business organization representing the business community
- Active in a senior citizens organization
- Active member of a bona fide taxpayer organization
- Parent or guardian of a Santa Maria High School District student
- Parent or guardian active in the Santa Maria PTA/PTSA or school site council
- At-large community member

Please indicate if you have experience in the fields listed below and list any skills or knowledge in those areas.

- Construction
- Architectural Design
- Public Financing
- Contract Law
- Program Management / Building Project
- Other _____ Describe: _____

ADDITIONAL INFORMATION

Have you been a member of any School District or school-based committee? YES NO

If so, which one, and in what capacity? _____

Are you an employee of the School District? YES NO

(NOTE: Employees of the School District are prohibited by law from being members of the Citizens Oversight Committee.)

Have you ever been employed by the School District? YES NO

Are you a vendor, contractor, or consultant to the School District? YES NO

(NOTE: Vendors, contractors and consultants of the School District are prohibited by law from being members of the Citizens Oversight Committee.)

Are you able to complete at least one term (two years) as a member of the Citizens Oversight Committee and refrain from becoming an employee, vendor, contractor or consultant of the School District during such time period? YES NO

Members of the Citizens Oversight Committee will be required to file financial disclosure/conflict of interest statements pursuant to rules and forms established by the Fair Political Practices Commission. Are you willing to file such financial disclosure statement if appointed to the Citizens Oversight Committee? YES NO

List present or past membership in any community service, civic or youth organization. Please also list participation in other activities such as seminars, workshops, volunteer work and professional organizations:

Please answer the following questions. (You may provide additional answers on separate sheets of paper.)

How long have you been a resident within the School District? _____ Years

Do you have any children or grandchildren who now attend (or have attended) School District schools? YES NO

Do you know of any reason, such as a potential conflict of interest, which would adversely affect your ability to serve on the Citizens Oversight Committee? YES NO

List references that have knowledge of your character, experience and abilities. Do not include names of relatives. (You may attach letters of reference from those listed if you wish.). Please provide Name/Address/Phone/Business/Occupation for each reference:

Explain why you would like to be appointed to this Committee:

CERTIFICATE OF APPLICANT

All answers and statements in this document are true and complete to the best of my knowledge and belief.

Signature _____ Date _____