

Culver City Unified School District
APPLICATION FORM
PARCEL TAX CITIZENS' OVERSIGHT COMMITTEE

TYPE OR PRINT IN BLACK INK

Application Deadline: 4:00p.m. on Thursday, May 16, 2019

Name:			
Mailing Address (include City, State, ZIP)			Resident in District? <input type="checkbox"/> Yes <input type="checkbox"/> No
Home Phone:	Work/Cell Phone:	Fax Number:	Email Address:

All persons are invited to apply for membership on Culver City Unified School District Committees regardless of actual or perceived race, color, ethnic group identification, national origin, ancestry, religion, age, marital or parental status, pregnancy, physical or mental disability, medical condition, veteran status, gender, genetic information, sex, sexual orientation, or the perception of one or more of such characteristics

The Citizens' Oversight Committee will meet regularly during the school year. The annual schedule of meetings will be determined at the start of each year. Additional meetings will be scheduled as needed.

All applicants should attach a copy of their most current resume and return with this application.

Please check all that apply:		
<input type="checkbox"/> Parent <i>(Also indicate if you have children in nonpublic schools)</i>	School	Grade Level of Children
<input type="checkbox"/> Expertise / experience in any or all of the following: finance, management, law		
<input type="checkbox"/> School Site or District Employee/CCUSD		
<input type="checkbox"/> Student <i>(currently)</i>		
<input type="checkbox"/> Community Member <i>(Non-Parent)</i>		

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Please list any local service or community organizations to which you belong. Also list any District Committees on which you are currently serving or on which you have previously served (include dates of service):

Specific abilities, experience, interests you would bring to the Citizens' Oversight Committee (please include community/business experience / occupation):

What would you hope to accomplish as a member of the Measure K Citizens' Oversight Committee?

Return completed application and resume to:

Robert Quinn, Assistant Superintendent
Culver City Unified School District
4034 Irving Place
Culver City, CA 90232
RobertQuinn@ccusd.org
(Fax): 310.842.4322

Applicant Signature

Date

Thank you for applying!