

El Rancho Unified School District

9333 Loch Lomond Drive, Pico Rivera, CA 90660 (562) 801-7300 phone, (562) 801-7315 fax

Citizens' Bond Oversight Committee (Measure A, EE, ER) Application Form

GENERAL INFORMATION:

Name:		Telephone:	Fax:	
Home A	Address:			
E-Mail:		Street	City	Zip
	OYMENT INFORMA			
Name o	of Employer:		Occupation:	
Work A	Address:		Work Telephone:	
Membe	ership position(s) that	applicant is qualified to	fill.	
the first	Active in a business of Active in a senior citic Active member of a because of Parent or guardian of Parent or guardian act council At-large community rendicate if you have expected of Construction Architectural Design Public Financing Contract Law	rganization representing to gens' organization ona fide taxpayer organization ona El Rancho Unified Sch ive in the El Rancho Unified nember erience in the fields listed		at apply. ated within the District SA or school site
	Building Project/Prog Other:	ram Management		
Describ	e:			
ADDIT	TIONAL INFORMAT	ION:		
1.	Have you been a mo □ Yes □ No	ember of any El Rancho U	Inified School District or sc	hool-based committee?
	If so, which one, an	d in what capacity?		
2.	Are you an employee of the School District? (NOTE: Employees of the School District are prohibited by law from being members of the Citizens' Oversight Committee.) \square Yes \square No			
3.	Have you ever been	employed by the El Rand	cho Unified School District	? □ Yes □ No

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PLEASE RETURN COMPLETED APPLICATION TO THE OFFICE OF THE SUPERINTENDENT, 9333 Loch Lomond Drive, Pico Rivera, CA 90660				
Signature	Date			
All answ	ers and statements in this document are true and complete to the best of my knowledge and belief.			
CERTIF	TICATE OF APPLICANT:			
(You ma	y continue your response to the above question on separate sheets of paper.)			
5.	Explain why you would like to be appointed to this Committee.			
4.	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.			
3.	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? \Box Yes \Box No			
2.	Do you have any children or grandchildren who now attend, or have attended, El Rancho Unified School District schools? $\Box Yes \qquad \Box No$			
1.	How long have you been a resident within the El Rancho Unified School District? Years			
Please a	nswer the following questions:			
participa	non in seminars, workshops, volunteer work, professionar organizations, etc.			
	st present or past membership in any community service, civic, or youth organizations. Also, list tion in seminars, workshops, volunteer work, professional organizations, etc.			
6.	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 statements if appointed to the Citizens' Oversight Committee? □ Yes □ No			
5.	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			
4.	Are you a vendor, contractor, or consultant to the School District? (NOTE: Vendors, contractors, and consultants of the School District are prohibited by law from being members of the Citizens' Oversight Committee.) □ Yes □ No			

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