

Alpine County Unified School District
Measure B – General Obligation Bond
Citizens’ Bond Oversight Committee

Application Form

Name:
Date of Application:
Mailing Address:
Phone Number(s):
E-mail address:

Section 1: Select the public interest category in which you are active and wish to represent:

- Business organization representing the business community located within the district
- Senior citizens’ organization
- Bona fide taxpayers’ organization
- Parent or guardian of student currently enrolled in the District
- Parent-teacher organization such as Parent Teacher Association or school site council
(must *also* be a parent or guardian of student currently enrolled in the District)
- Member of the community at-large

Section 2:

- I have reviewed and can function under the Bylaws for the Citizens’ Bond Oversight Committee adopted by the District’s Board of Trustees. (attached)

Section 3: Please complete the following:

Statement of reason for interest in serving on the Citizens' Bond Oversight Committee:

Statement of your expected contributions, if appointed:

Statement of your qualifications/related experience:

Section 4: References

Professional References:

1. Name: _____

Position: _____

Address: _____

Phone Number(s): _____

2. Name: _____

Position: _____

Address: _____

Phone Number(s): _____