

School District of New London School

**School/Community Member Committee Application**

This application form relates to potential service and selection on a School District of New London Board of Education committee as an advisory body.

Name: \_\_\_\_\_

Primary Address: \_\_\_\_\_

City/Village/Township: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Is the above residence within the boundaries the School District of New London:

Yes: \_\_\_\_\_

No: \_\_\_\_\_

Not Sure: \_\_\_\_\_

Preferred Email Address: \_\_\_\_\_

Preferred Daytime Telephone Number: \_\_\_\_\_

Potential Board of Education school community committee members must be a resident that lives within the School District to of New London or an employee of the District.

- Based on the above criteria, please select any of the following that pertain to you:

\_\_\_\_\_ I am the parent or guardian of a student currently enrolled in the SDNL.

\_\_\_\_\_ I am currently an employee of the SDNL.

\_\_\_\_\_ I am none of the above, but I am a community member who is interested in the SDNL.

Please identify any current or previous service on an SDNL advisory committee, Board or organization:

Please identify any current or previous service or membership in other community groups or organizations:

Please briefly describe why you are interested in serving as a SDNL advisory Board committee member:

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

***Please note that submitting an application does not guarantee selection for service, but the application will be considered.***

***Please note that information provided on this form is subject to Open Records requests, and may be used in district reports related to advisory bodies.***