SAN DIEGO UNIFIED SCHOOL DISTRICT PROPOSITION S INDEPENDENT CITIZENS' OVERSIGHT COMMITTEE

Application for Appointment

Name:	
Home Phone:	Work Phone:
	E-Mail:
Occupation:	
Please check all categories appropriate:	that apply to you. You may check more than one category, as
A parent or guardian active in parent-teach Site Council. Active in a senior citi Active in a bona fide	of a child enrolled in the San Diego Unified School District and the organization, such as the Parent Teacher Association or School zens' organization. taxpayers' organization. , or other qualified professional (i.e. architect, engineer, contractor,
Please answer the following 1. Are you a resident with the second of th	ithin the San Diego Unified School District?
2. Do you have children Yes No If yes, in which schools?	currently enrolled in the District:
3. Do you know of any your ability to serve o No	reason, such as a conflict of interest that would adversely affect n the Independent Citizens' Oversight Committee:

If yes, please explain:		+ _
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Yes No Please be advised that ca	aployed by San Diego Unit arrent employees or officion he Independent Citizens' (ied School District? Als of the Escondido Union School District Oversight Committee, per Education Code
5. Are you an employe San Diego Unified So Yes No If yes, please explain:	e of any vendor, contracto chool District?	or, or consultant currently retained by the
Please be advised that a District cannot be app Education Code Section	ointed to the Independe	nsultant of the San Diego Unified School nt Citizens' Oversight Committee, per
6. Educational Backgro Please indicate your higher High School Community C Bachelor's Degree Doctorate	est level of educational: College/Vocational Degree	
Degree/Major/Certificate:		
7. Personal References	(Please provide two busine	ess related references)
Name	Address	Telephone

8. Expertise: A majority of the members of the Committee should possess expertise in one of the following: (please check all the apply)
☐ Large scale construction operations;
☐ Municipal/public finance matters;
☐ Multiple years expertise with agency/entity budgeting (which may include public agency or public entity budgeting);
☐ Project management
Please provide a description of your experience and background as it relates to the categories checked above. Attach additional pages as necessary.
9. Experience: Please provide any additional background experience that would prove useful to you as a member of the Independent Citizens' Oversight Committee. Attach additional pages as necessary.
10. Why would you like to serve on the ICOC and what additional information qualifies you to be a Committee member? What do you feel you could contribute? Attach additional pages as necessary.

11. What do you feel are the most important issues to be addressed by the Independent Citizens' Oversight Committee? Attach additional pages as necessary.	
12. Please add any comments that you feel would assist the Board of Education in the evaluation of your application: Attach additional pages as necessary.	
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Certificate of Applicant: All answers and statements in this document and attachments are true and complete to the best of my knowledge and belief. I understand that this application is a public record and may be discussed at a public meeting of the Board of Education.	1
Date: Signature of Applicant:	
For consideration of immediate ICOC openings, please submit completed applications with all attachments to: San Diego Unified School District, Board of Education, 4100 Normal Street, room 2231, San Diego, CA 92103, on or before <u>TIME on DATE</u> Faxed applications will be accepted. Please fax to (619) 297-5624	
Should you have any questions, please contact Anny Champy at (858) 637-3609	