



**Elk Grove Unified School District**  
Measure M – General Obligation Bond  
Citizens' Oversight Committee

**Application**

Completed applications can be mailed, faxed or hand delivered to the Facilities and Planning Department and must be received by **4:30 p.m. on March 17, 2017.**

**EGUSD Facilities & Planning Department**  
**9510 Elk Grove-Florin Road, Room 206**  
**Elk Grove, CA 95624**

**Office: (916) 686-7711**  
**Fax: (916) 686-7754**

**Elk Grove Unified School District**  
Measure M – General Obligation Bond  
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**Application Form**

Name:
Date of Application:
Mailing Address:
Residence 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, Parent Teacher Association, and/or school site council (must *also* be a parent or guardian of student currently enrolled in the District)
- Member of the community at-large

If applicable, please list the name of the school and/or organization indicated above:

\_\_\_\_\_

**Section 2:**

**Please answer the following questions:**

- 1) How long have you been a resident within the boundaries of the District? \_\_\_ years \_\_\_ months
- 2) Have you or your children ever attended District schools?  Yes  No

Comments: \_\_\_\_\_

- 3) Do you have or have you had any other relatives or close friends who have attended District schools?  
 Yes  No

Comments: \_\_\_\_\_

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**Applicant's Name:** \_\_\_\_\_

- 1) Do you know of any reason, such as a potential conflict of interest (real estate, business, litigation, etc.), which would adversely affect your ability to impartially serve on the Citizens' Oversight Committee?  Yes  No

Comments: \_\_\_\_\_

- 2) Are you willing to accept either a one-year or two-year appointment to the Committee?

One-year  Two-year  Either

- 3) Are you or have you ever been an official of or employed by the Elk Grove Unified School District?  
 Yes  No

If Yes Please Explain: \_\_\_\_\_

- 4) Are you or have you ever been a vendor, contractor or consultant for the Elk Grove Unified School District?  Yes  No

If yes, please explain: \_\_\_\_\_

**Section 3:**

**Please complete the following:**

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

**Elk Grove Unified School District**  
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Citizens' Oversight Committee

**Applicant's Name:** \_\_\_\_\_

Statement of your expected contributions, if appointed:

Statement of your qualifications and/or related experience:

Statement of your knowledge of the role of a Citizens' Oversight Committee:

**Elk Grove Unified School District**  
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**Applicant's Name:** \_\_\_\_\_

**Section 4:**  
**Relevant References:**

1) Name: \_\_\_\_\_

Position: \_\_\_\_\_

Physical and Email Address: \_\_\_\_\_

\_\_\_\_\_

Phone Number(s): \_\_\_\_\_

2) Name: \_\_\_\_\_

Position: \_\_\_\_\_

Physical and Email Address: \_\_\_\_\_

\_\_\_\_\_

Phone Number(s): \_\_\_\_\_

3) Name: \_\_\_\_\_

Position: \_\_\_\_\_

Physical and Email Address: \_\_\_\_\_

\_\_\_\_\_

Phone Number(s): \_\_\_\_\_

**Certification of Applicant**

I have reviewed and can function under the Bylaws for the Citizens' Oversight Committee adopted by the District Board of Education. I certify that the answers and statements in this document are true and complete to the best of my knowledge.

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

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