Garden Grove Unified School District

Public Information Office

APPLICATION

Citizen's Bond Oversight Committee (BOC) - Measure A

Select One:	ii s Boliu Oversig	int Committee	(BOC) - IVIE	asule A
First Name		Middle Initial Last Name		
Home Address				
City		State	Zip	
Phone: Home	Busine	ess	Ce	II
Preferred method of phone E-mail	contact: Home	e Busine	ess Cel	I [
Occupation				
Company				
Business Address				
City		State	Zip	
Public and Community		,		
Why do you want to se	erve on the Measure	A Citizens' Ove	rsight Committ	tee?
I would be able to repr	esent the following o	constituencies ir	the District:	(check all that apply)
Business Represer Organization:	ntative – Active in a b	usiness organizat	tion representin	g local business.
Senior Citizen Grou	up Representative –	Active member in	a senior citizer	n's organization.
Taxpayer Organiza Organization:	tion Member – Active	e in a bona-fide ta	xpayers associ	ation.

APPLICATION

Citizen's Bond Oversight Committee (BOC) - Measure A

	Child's Name and School:
	Child's Name and School:
	Parent/ Guardian of Child Enrolled in District and Active in a Parent-Teacher Organization.
	Child's Name and School:
	Child's Name and School:
	Organization:
	At-Large Community Member – Resident of the Garden Grove Unified School District.
PI	lease Note any additional information you feel should be considered as part of your application:
ļ_	Check either Yes or No Yes No
1.	
2.	
3. 4.	
4.	adversely affect your ability to serve on the Citizen's Bond Oversight Committee?*
5.	
	embers of the Citizen's Bond Oversight Committee. Employment which could result in becoming a contractor or subcontractor e district would also be a potential conflict.) (Check if applicable) I am related to a current employee of the district. If yes, name of employee and your relationship:
	I understand that I may not be an employee or official of the Garden Grove Unified School District a vendor, contractor, or consultant for the Garden Grove Unified School District and serve
	member of the Bond Oversight Committee.
	I certify that I meet all eligibility requirements including (1) at least one criteria indicated by the
a ur (n	I certify that I meet all eligibility requirements including (1) at least one criteria indicated by the ndersigned on page 2 of this Application, and (2) a resident of the Garden Grove Unified School Distr
a ur (n C	I certify that I meet all eligibility requirements including (1) at least one criteria indicated by the indersigned on page 2 of this Application, and (2) a resident of the Garden Grove Unified School Distrinap attached), and (3) at least 18 years of age, and (4) not be disqualified from holding civil office by the
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a ur (n C	I certify that I meet all eligibility requirements including (1) at least one criteria indicated by the indersigned on page 2 of this Application, and (2) a resident of the Garden Grove Unified School District nap attached), and (3) at least 18 years of age, and (4) not be disqualified from holding civil office by the onstitution or any law of the State of California. Sint Name Date Cation cannot be saved. After completing, please print, sign, and mail or bring the application to this ad Garden Grove Unified School District
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Completed applications must be received no later than 4 p.m. PST April 15, 2016

It is the policy of the Garden Grove Unified School District not to unlawfully discriminate on the basis of sex, sexual orientation, gender, ethnic group identification, race, ancestry, national origin, color, religion, marital status, age or mental or physical disability in the educational programs or activities which it operates.

Office Use Only – High School Area of Residence: BGHS GGHS LQHS LAHS PHS RAHS SHS