The School District of the City of Highland Park

Public School Academy Board Member Application





PERSONAL INFORMATION

Name of academy for which you are requesting appointment:							
Title/Prefix: ☐ Mrs.	☐ Ms.	☐ Mr.	☐ Miss	□ Dr.	☐ Other		
Name:							
First			Middle			Last	
Home Address:							
Street N	umber						
City					State		Zip
Employer:					Tit	tle:	
Employer's Address:							
	reet Number						
	ity				State		Zip
Preferred Method of Co	ntact: 🗆 Hor	me 🗆 Work	☐ Cellular				
Home Number:				Work Nur	nber:		
Email Address:							
Spouse/Partner's Name:	First			Middle		Last	
Are you a United States	citizen? □ Ye	s \square	No	Are you a	a Michigan reside	ent? □ Yes	□ No
If applying for a specific If yes, how many?	academy, do	you have ch	ildren or grai	ndchildren t	hat attend that a	cademy? 🗌 Ye	es 🗆 No
Please check your highe	st education	level:					
☐ High Scho	ool/GED			☐ Associate	e's Degree	☐ Maste	r's Degree
☐ Trade/Bu	ısiness Schoo	I		☐ BA or BS	Degree	□ MD, D	O, JD, PhD, etc.
Please check each area	of expertise y	ou would co	ontribute to a	board:			
☐ Commun	ity Service		[☐ Education	1	☐ Financ	ce
☐ Fundraisi	ng			☐ Law		☐ Mana	gement
☐ Marketing	g		[☐ Personne	I	☐ Public	Relations
☐ Parent Ir	nvolvement P	rograms		☐ Others (p	lease specify):		

Optional Information

CONDITIONS OF APPOINTMENT

The following questions indicate the minimum conditions that must be met in order to be considered for appointment. Please complete the following section by indicating yes or no.

 \square Yes \square No

1. Will you be able to attend regularly scheduled board meetings?

2.	Do you agree to complete six (6) hours of board orientation and development during the first year of your appointment and three (3) hours each year thereafter?	□ Yes	□No
3.	Do you agree to complete an annual conflict of interest disclosure?	□ Yes	□No
	RELATIONSHIP TO THE ACADEMY		
	ase complete the following section by indicating yes or no. If you answer "yes" to any of the following questions, Ilanation on a separate sheet of paper. Please label explanations with the number of the corresponding question		rovide an
1.	Do or will you or your spouse/partner have any contractual agreements with the academy?	☐ Yes	□ No
2.	Do or will you, your spouse/partner, or any member of your immediate family have any ownership interest in a service provider or any other company contracting	ny educa	tional
	with the academy?	☐ Yes	□ No
3.	Did or will you or your spouse/partner lease or sell property to the academy?	☐ Yes	□ No
4.	Did or will you or your spouse/partner sell any supplies, materials, equipment or other		
	personal property to the academy?	☐ Yes	□ No
5.	Have you or your spouse/partner guaranteed any loans for the academy or loaned it any money?	☐ Yes	□ No
6.	Are or will you, your spouse/partner or any member of your immediate family be employed by the academy,	its educa	itional
	service provider or other contractors?	☐ Yes	□ No
7.	Did you or your spouse/partner provide any start-up funds to the academy?	☐ Yes	□ No
8.	Does any other individual, board, group or corporation believe it has a right to control or have input on votes y	ou will ca	ist as a
	member of the academy board?	☐ Yes	□ No
9.	Do you currently serve as a member of the board of any public school district or public school academy other t	han the b	ooard for
	which you are applying?	☐ Yes	□ No
10.	Do you currently serve as a public official? (If you are being re-nominated to the same public school academy be	oard and	l do not
11.	serve as a public official in any other capacity, please select "No" as your response.) To the best of your knowledge, are there situations not described above which may give the appearance of a constitution between you and the academy, or which would make it difficult for you to discharge your duties or exercise judge.		
	independently on behalf of the academy?	☐ Yes	□ No
12.	Did or do you or your spouse/partner, or any member of your immediate family, have ownership interest, direct any corporation, partnership, association, or other legal entity which would cause you to answer 'yes' to quest	-	-
		∏ Yes [

ETHICAL ISSUES

Please complete the following section by indicating yes or no. If you answer "yes" to any of the following questions, please provide an explanation on a separate sheet of paper.

CITATIONS		
Have you ever been cited for a breach of ethics for unprofessional conduct, or been named in a		
complaint to a court, administrative agency, professional association, disciplinary committee or		
other professional group?	☐ Yes	□ No
AGENCY PROCEEDINGS/CIVIL LITIGATION		
Are you presently or have you ever been involved in administrative agency proceedings or		
civil litigation?	☐ Yes	□ No
Has any business involving you, your spouse/partner, close family members or close business associates been part of any administrative agency proceedings or civil litigation relevant to the		
board member position?	☐ Yes	□No
CRIMINAL BACKGROUND DISCLOSURE		
The School District of the City of Highland Park will perform a criminal records check from local, state and federal I agencies prior to your appointment. If the reports received from these agencies do not match your representation appointment to an academy board may be voided at the sole discretion of The School District of the City of Highla Complete this section by placing your initials in the space beside option 1, 2 and/or 3. If you initial option 1 or 2, ple separate sheet of paper what the charges were and which courts were involved.	s listed bond nd Park.	elow,
1 I have been convicted or pled either guilty or nolo contendere (no contest) to one or more crimes.		
2 I am currently charged with one or more crimes.		

I have not been convicted or pled either guilty or nolo contendere (no contest) to any crimes, nor am I currently

charged with more than one crimes.

Initial

APPLICATION VERIFICATION

I recognize that all information submitted with this application or gathered by The School District of the City of Highland Park as a result of this application becomes a matter of public record, subject by law to disclosure upon request to members of the general public. I will hold The School District of the City of Highland Park, its trustees, officers, employees and authorized agents harmless from liability for the disclosure of any information it reasonably believes is true based upon my representations or resulting from this application process.

I understand that if I am appointed, I will be required and agree to complete six (6) hours of board orientation and development during the first year of my term and three (3) hours each year thereafter.

I understand that if I am appointed, I will be required and agree to complete an annual conflict of interest disclosure.

Signature

I understand that The School District of the City of Highland Park is under no obligation to appoint me or any nominee to a public school
academy board. My signature below certifies that all information provided in this application is true and complete.

Date

CONSENT FOR PERSONAL BACKGROUND CHECK

A criminal records check must be conducted as a condition for appointment as a public official serving on the board of a public school academy authorized by The School District of the City of Highland Park. This consent does not authorize, nor will The School District of the City of Highland Park conduct, a consumer credit check.

Information requested on this page will be used to conduct a criminal records check and will not be used to determine qualifications as a proposed public school academy board member. This page will be removed prior to review of the information contained in the application.

Please print or typ	pe the following information:		
Print or type your	full name:		
	First	Middle	Last
Current Address:			
	Street Number		
	City	State	Zip
Former Address:			
	Street Number		
	City	State	Zip
Date of Birth:	onth Day Year		
Gender: \square Male	☐ Female		
Ethnicity: \square Ame	rican Indian or Alaska Native	☐ Asian American	☐ Black or African American
	Native Hawaiian/Pacific Islander	☐ White	☐ Hispanic/Latino
	cument I acknowledge receipt of this di ninal records report.	isclosure and authorize The Scho	ol District of the City of Highland Park to obtai
District of the City		I specifically authorize The School	rictions that I have included, to The School ol District of the City of Highland Park to Iforcement agencies.
	of any information it reasonably believ		s and authorized agents harmless from liability entations or resulting from this criminal record
By my signature, I	assert and certify that the information	provided is, to the best of my kn	owledge, true and complete.
Signaturo			- Date