PARENT INTEREST IN BOARD SERVICE FORM

DATE:	
NAME:	
ADDRESS:	
PHONE:	
EMAIL:	
NAME OF CHILD(REN):	SCHOOL ATTENDING IN SEPTEMBER 2015:
Are you an employee of the Rochester City Sc	chool District (RCSD)? Yes No
Have you ever done business with RCSD as a If so, please describe status, nature and extent	
District as of September 2015 AND who are n Board's committees. No one may serve on a	of students attending the Rochester City School not District employees will be allowed to serve on the committee who has a personal financial interest in ish to serve. No one may serve on more than one
Please indicate your preferences for servir (first choice - 1, second choice - 2, third ch	8
Audit	
Finance	
Policy Community & Intergovernmental Relation	elations (CIGR)

Excellence in Student Achievement (ESA)

Please provide your resume or describe your interest and experience in this field: (Attach additional sheets as needed)

Return form to: Rochester Board of Education, 131 West Broad Street, Rochester, NY 14614. Questions? Please call the Board Office at (585) 262-8525.

FORMS DUE BY: MARCH 16, 2015