



Citizens' Bond Oversight Committee Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

_____ *City State ZIP Code*

Phone: (____) _____ E-mail Address: _____

Category (you may check all that apply):

- _____ active in a business organization representing the business community located within the school district
- _____ active in a senior citizens organization
- _____ active in a bona fide taxpayers organization
- _____ active in a school-connected organization
- _____ parent of an enrolled student(s)
- _____ member of the community at-large

Reasons for Serving & Qualifications

Please use no more than the space provided to give your reasons for serving and qualifications.

Disclaimer and Signature

Members of the Committee are expressly subject to the requirements and limitations of Government Code Section 1090, et seq. (which prohibits involvement in public agency contracts) and Government Code Section 1125, et seq. (which prohibits incompatible public offices). Members may not be employees of the district.

I certify that my answers are true and complete to the best of my knowledge. I understand that false or misleading information in my application may result in my removal from the committee.

Signature _____ Date: _____
(digital): _____

Applications are to be sent to the district care of the Nikki_Doble@crpusd.org. Final selection of the Citizens' Bond Oversight Committee will be made by the Board of Trustees.