

## PARENT BOARD MEMBER INFORMATION FORM

Name:	Parent/Guardian of: Grade/s:
Occupation:	Home Address:
Cell Phone:	Home Phone:
Parish:	Email:
<b>Candidate for the position of:</b>  <b>Parent Member</b>  <b>Management Board of Directors</b>	Documentation Attached (all required)  <input type="checkbox"/> Letter of Interest <input type="checkbox"/> Resume/Statement of Qualifications
<p>I hereby certify that I am a current parent or guardian in good standing at St. Charles Catholic School and that I am seeking a Parent Board Member position on the Board of Directors at St. Charles Catholic School for a 2 year term. I agree to abide by the Terms and Expectations of a Board Member as outlined, as well as the Board Members Code of Conduct and Confidentiality Agreement.</p> <p><b>Signature:</b>_____ <b>Date:</b>_____</p>	

Areas of Interest or Experience\_\_\_\_\_

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|--|---|
| <input type="checkbox"/> Fundraising                       | <input type="checkbox"/> Capital Campaign |
| <input type="checkbox"/> Finance                           | <input type="checkbox"/> Marketing        |
| <input type="checkbox"/> Alumni                            | <input type="checkbox"/> Governance       |
| <input type="checkbox"/> Buildings & Grounds / Maintenance | <input type="checkbox"/> Other _____      |