



Riverside Unified School District

Operations Division – Planning and Development

3070 Washington Street, Riverside, CA 92504-4697 • (951) 788-7496 • (951) 778-5646

If you have served on other school district, city or community committees please list and briefly describe your role:

I would be able to represent the following constituencies in the District: *(check all that apply)*

- Business Representative** – Active in a business organization representing local business

Organization: _____

- Senior Citizen Group Representative** - Active member in a senior citizens' organization.

Organization: _____

- Taxpayer Organization Member** - Active in a bona fide taxpayers' association.

Organization: _____

- Parent or Guardian of Child Enrolled in District.**

Child's Name and School: _____

Child's Name and School: _____

- Parent /Guardian of Child Enrolled in District & Active in a Parent-Teacher Organization**

Child's Name and School: _____

Child's Name and School: _____

Organization: _____

- At-Large Community Member** – Resident of the Riverside Unified School District.

Name: _____

Name: _____

Please note any additional information you feel should be considered as part of your application:



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1. Are you an employee of the District?*
2. Are you a vendor, contractor, or consultant to the school district?*
3. Do you have conflicts that would preclude your attending meetings?
4. Do you know of any reason, such as a potential conflict of interest, which would adversely affect your ability to serve on the Independent Citizens' Oversight Committee?*
5. Are you willing to comply with the ethics code included in the bylaws?
6. Do you agree with the Bylaws and are you willing to comply with the existing Bylaws?

YES	NO

(*Employees, vendors, contractors, and consultants of the Riverside Unified School District are prohibited by law from being members of the Citizens' Oversight Committee. Employment which could result in becoming a contractor or subcontractor to the district would also be a potential conflict.)

Signature of Applicant**

All answers and statements in this document are true and complete to the best of my knowledge.**

Signature _____ Date _____

****The information contained in this application may be made public when presented at a Board of Education Meeting.**

Submitted applications are only valid for 6 months from the date signed.