



## Candidate Information Sheet for Greater Albany Public School District Budget Committee

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
                    Last                                    First                                    Initial

Home address: \_\_\_\_\_

Home telephone: \_\_\_\_\_

Cell telephone: \_\_\_\_\_

Work telephone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Occupation: \_\_\_\_\_

Number of years you have resided in Greater Albany Public School District: \_\_\_\_\_

Do you meet the following qualifications: (Please answer yes or no)

1. Do you live in the district? \_\_\_\_\_
2. Are you an officer, agent or employee of the district? \_\_\_\_\_
3. Are you a registered voter? \_\_\_\_\_

Do you have children in the Greater Albany Public School District? \_\_\_\_\_

If so, what schools do/did they attend? \_\_\_\_\_

For what reason(s) do you desire to be a member of the Budget Committee? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you worked on any school committees? \_\_\_\_\_

If so, which committees? \_\_\_\_\_

Please list any other involvement you have had with the school district: \_\_\_\_\_

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Other community and business activities: \_\_\_\_\_

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What qualifications do you have that will help you to be a member of the Budget Committee? \_\_\_\_\_

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Signature \_\_\_\_\_

Please submit completed applications via mail to the Greater Albany School District, 718 Seventh Avenue SW, Albany, OR 97321; or email to [jim.haggart@albany.k12.or.us](mailto:jim.haggart@albany.k12.or.us)