

**APPLICATION FOR CROOK COUNTY SCHOOL DISTRICT  
BUDGET COMMITTEE MEMBER**

Date: \_\_\_\_\_

Name: \_\_\_\_\_

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

Phone: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Are you a registered voter? \_\_\_\_\_ Profession: \_\_\_\_\_

How long have you lived in Crook County? \_\_\_\_\_

Children in School System:	Age _____	Grade _____	School _____
	Age _____	Grade _____	School _____
	Age _____	Grade _____	School _____
	Age _____	Grade _____	School _____

1. Please state why you wish to serve on the Crook County School District Budget Committee.

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

2. What are your thoughts about the goals and needs of the Crook County schools?

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

3. Education.

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

4. Community service and activities (include school-related activities).

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

5. Hobbies, sports, organizations, etc. \_\_\_\_\_

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

Signature: \_\_\_\_\_

**Note: If you need more room, please use the back of this sheet or attach another sheet.  
Please return your application to the Crook County School District Admin. office  
at the address shown above. Posting is open until filled.**