

**APPLICATION FOR APPOINTMENT
TO THE ALEXANDER CITY BOARD OF EDUCATION**

Date of Application: _____

Name: _____
(First) (Middle Initial) (Last)

Address: _____

Telephone: _____ Other: _____

Employer: _____ Position: _____

Education:

High School: _____ Graduation Date: _____

College: _____ Degree: _____ Year: _____

Graduate School: _____ Degree: _____ Year: _____

Academic Honors (including academic societies): _____

References:

Name: _____ Address: _____ Telephone: _____

Name: _____ Address: _____ Telephone: _____

Name: _____ Address: _____ Telephone: _____

Number of children currently in school: _____ Grades: _____

Attach a separate sheet to answer the following questions if needed.

Please state your experience and/or academic training that would be valuable to the Alexander City Board of Education.

What do you consider to be a significant contribution that you have made to Alexander City and/or the the community at large?

The above information is true and correct to the best of my knowledge.

(Signature) (Date)

(For use by the City Council)

Received: _____
(Date)

Interview: _____
(Date)