



BURBANK UNIFIED SCHOOL DISTRICT
Application for Appointment as a Member/Alternate Member
of the SCHOOL FACILITIES OVERSIGHT COMMITTEE (SFOC)

Name: _____ Email: _____

Address: _____

Phone: Home: _____ Work: _____ Cell: _____

All information provided on this form is public information subject to the Public Records Act.

How long have you been a resident of Burbank? _____ Are you a registered voter? _____

- Check the designation(s) which best describe your representation:
- Business Organization
 - Senior Citizen
 - Taxpayer's Group
 - Parent
 - Parent Active in PTA/SSC

Educational background: _____

Name of employer and position held: _____

Employer address: _____

Professional organizations: _____

School, Community, and Youth Activities: _____

Please go to Page 2
Use additional sheets if necessary

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Name: _____

Are you aware of any reason, such as a Conflict of Interest, which would adversely affect your ability to serve on the School Facilities Oversight Committee? If yes, please explain below:

What experience and qualifications would you bring to the SFOC?

Why would you like to be appointed to this position?

Signature _____

Submit completed application* to: Facilities Services
Burbank Unified School District
510 S. Shelton St.
Burbank, CA 91506
Or email to: CrystalCozacos@burbankusd.org

*Applications must be received and time-stamped by Facilities Services
by 4:30 p.m. on Friday, May 16, 2025.