



SANTA MONICA - MALIBU UNIFIED SCHOOL DISTRICT

**FINANCIAL OVERSIGHT COMMITTEE
STUDENT APPLICATION FORM**

TYPE OR PRINT IN BLACK INK

Name:	
Mailing Address	City, State, ZIP
Currently Enrolled at: <input type="checkbox"/> Santa Monica High School <input type="checkbox"/> Malibu High School <input type="checkbox"/> Olympic High School	Grade Level: Graduation Year:
Contact Phone: Home: <input type="checkbox"/> Cellphone: <input type="checkbox"/>	Email Address:

Please list any local service or community organizations to which you belong. Also list any School Committees/Clubs on which you are currently serving or on which you have previously served (include dates of service):

Specific experience, interests, and perspectives you would bring to the Financial Oversight Committee (please include community service, extra-curricular activities, higher education aspiration):

What would you hope to accomplish as a Student Member of the Financial Oversight Committee?

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FINANCIAL OVERSIGHT COMMITTEE
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THIS INFORMATION IS VOLUNTARY

- | | |
|--|--|
| <input type="checkbox"/> American Indian or Alaskan Native | <input type="checkbox"/> African American / Black |
| <input type="checkbox"/> Asian | <input type="checkbox"/> White |
| <input type="checkbox"/> Pacific Islander | <input type="checkbox"/> Hispanic / Latino |
| <input type="checkbox"/> Filipino | <input type="checkbox"/> Multi-racial / Multi-ethnic |

All students are invited to apply for membership on Santa Monica-Malibu Unified School District Advisory Committees regardless of race, age, sex, religion, marital status, national origin, ancestry, sexual orientation or disability.

The Financial Oversight Committee (*FOC*) will meet regularly during the school year. The annual schedule of meetings will be determined at the start of each year. Additional meetings will be scheduled as needed.

Applicants may attach a copy of their resume' and return with this application.

Print Name	Signature
Date	

Return completed application to FOC@smmusd.org:

Superintendent's Office
Santa Monica-Malibu Unified School District
1717 4th Street
Santa Monica, CA 90401-3391

Thank you for applying!