

Keeneyville Elementary School District 20 SCHOOL BOARD APPOINTMENT QUESTIONNAIRE

Name:		
Address:	City:	Zip Code:
Home Phone No.:	Business/Cell No.:	
I am a registered voter in School District #20: I am eighteen years of age or more: I have resided in District #20 for at least one ye I am a citizen of the United States: To assist the school board in making its decisplease submit a written response to the follow	ar: Yes No YesNo sion in filling the school board m	ember vacancy,
1. Why do you want to serve on the Board of Ed	ducation?	
2. What parts of your life experience do you fee3. What is your experience with the school distr	·	vice?
4. Do you know what kind of time commitment time to this task?	t is necessary and are you willing to	o commit the necessary
5. Describe boards or work teams you have been	n part of. What would an ideal boa	rd look like to you?
6. Are there any particular changes that you wo	uld like to pursue in terms of the d	istrict?
Please return this questionnaire by Monday, May 15, 2017 to: Mail or Keeneyville Elementary School District 20		

arop-ou:

5540 Arlington Drive East Hanover Park, IL 60133

E-mail: mnoyola@esd20.org
For questions, please call Maria Noyola: 630 894-4004.