

SANTA MONICA-MALIBU UNIFIED SCHOOL DISTRICT

Office of the Personnel Commission

APPLICATION FOR APPOINTMENT: Personnel Commissioner

Name: _____
Last First Middle

Residence Address: _____
Street City/State Zip Code

Primary Phone: _____ Alternate Phone: _____

Email: _____

1. Are you a resident within the territorial jurisdiction of the Santa Monica-Malibu Unified School District? Yes _____ No _____
2. Are you a registered voter? Yes _____ No _____
3. Are you a known adherent of the Merit System? Yes _____ No _____
4. Are you employed by the Santa Monica-Malibu Unified School District? Yes _____ No _____
5. Do you have any relatives working for the Santa Monica-Malibu Unified School District? * If **Yes**, please list: Yes _____ No _____

Name: _____ Relationship: _____

Name: _____ Relationship: _____

6. Please provide a letter of interest and a resume (attached to this application), with details outlining your formal education and any voluntary and/or paid (including self-employment) experience. Please include any community and/or professional activities you have been involved in, whether they were performed as a member or as an officer, director, or board member.
7. In summary format, (on no more than one attached blank sheet), what experience(s), knowledge, skills and abilities do you possess that you believe will contribute to your success as a Personnel Commissioner?

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

Signature: _____

Date: _____