



BOARD OPERATIONS GUIDELINE

APPROVED: February 10, 2015

REVISED:

004-BOG-2. BOARD OF SCHOOL DIRECTORS APPLICATION FORM

Name: _____

Address: _____

Home Telephone Number: _____

Office Telephone Number: _____

Fax Telephone Number: _____

Email Address: _____

Do you currently have children in the Upper Darby School District? Yes No

Have you ever had children enrolled in the Upper Darby School District?
 Yes No

Have you served on any district/school committees or participated in any district-sponsored activities? No Yes If yes, please list:

Are you involved in any community activities or service organizations? No Yes
If yes, please list:

What qualities, talents, or experience would you bring to the Board?

Signature

Date

Please attach your Resume and Cover Letter and submit to the Board Secretary.