Cherryvale Community Center

Advisory Board Member Application

Applicant Information

Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	Zip	
Phone	E-Mail Address		

Are You A Citizen Of The United States?	Yes ☐	No ☐	Are You A Registered Voter?	Yes ☐	No ☐
Are You A Resident Of Cherryvale?	Yes ☐	No ☐	Do You Live Within USD 447?	Yes ☐	No ☐

Education

High School			
Did You Graduate?	Yes ☐	No ☐	Degree
College			
Did You Graduate?	Yes ☐	No ☐	Degree
Other			
Did You Graduate?	Yes ☐	No ☐	Degree

Current Employment

Company
Job Title
Responsibilities

Question 1: "Why Do You Want To Serve On The Community Center Advisory Board?"

Question 2: "What Is Your Vision For The Future And Use Of The Cherryvale Community Center?"

Question 3: "What Factors Will You Consider In Making Community Center Decisions?"

Question 4: "Will You Be Willing To Provide Supervisory Oversight To Programs?"

Signature

Date