

SCHOOL BOARD APPLICATION

NAME	PHONE			
ADDRESS	CITY	ZIP	AGE	
YEARS AS A PARISHIONER	# OF CHILDREN			
EDUCATION:				
ELEMENTARY	CITY & STATE	YEAR (GRADUATED	
HIGH SCHOOL	CITY & STATE	YEAR	YEAR GRADUATED	
COLLEGE	CITY & STATE	YEAR (GRADUATED	
member.				
Using no more than 75 words, brief board.	ly state how you think you	could be most ef	fective in helping our so	
				
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As an applicant, I fully understand required to attend regularly monthlam a member.				
	Signature	····	Date	