

# ACSA Region 2



Association of California School Administrators

## Application for Region Council/Committee Representative Position\* (\*Must be a member of state ACSA)

Your Name: _____	Your Charter: _____
School/District (worksite): _____ District Superintendent: _____	Position: _____
Please check the appropriate box for affirmative action: _____ Male ___ Female ___ African/American ___ Asian ___ Caucasian ___ Eskimo-American ___ Filipino ___ Latino ___ Pacific Islander	
Address: _____ City, zip: _____	Phone: (_____) _____ Fax: (_____) _____ Email: _____
Committee or Council: _____	
Using the space provided and/or by attaching an additional page, provide a written description of the reason you would like to serve in this position:	
Indicate your professional experience that would make you an excellent candidate for this position (must attach resume and/or vita):	
___ I commit to make every Council/Committee meeting or arrange to send an alternate.	
Signed: _____	Date submitted: _____

Please return to:  
Mail to: PO Box 1841, Oroville 95965  
Or via email to: Judy Bennett at [acsaregion2@gmail.com](mailto:acsaregion2@gmail.com)