

**Parent Advisory Committee Interest Application**  
**2018-2019 School Year**

Name: \_\_\_\_\_ Tribe: \_\_\_\_\_

What is the nearest major airport? \_\_\_\_\_ Your child's name: \_\_\_\_\_

Phone number and/or email to reach you: \_\_\_\_\_  Cell  Home Email: \_\_\_\_\_

Why would you like to be on the Parent Advisory Committee? \_\_\_\_\_

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What do you feel would be your contribution to the Parent Advisory Committee? \_\_\_\_\_

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What do you feel are the greatest needs at Chemawa? \_\_\_\_\_

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Would you be available to travel 2 times per year during the week for 2-3 days at a time?  Yes  No

Signature: \_\_\_\_\_

Date: \_\_\_\_\_