

Parent Advisory Committee Interest Application
2016-2017 School Year

Name: _____ Tribe: _____

What is the nearest major airport? _____

Best phone number and/or email to reach you: _____ Cell Home _____ Email

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

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

What do you feel are the greatest needs at Chemawa? _____

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

Signature: _____ Date: _____