

## SCHOOL ADVISORY BOARD MEMBERS APPLICATION

Name:		
Address:		
City:	State:	Zip:
Home #:	Work #:	Cell:
Email Address: Home:	W	Vork:
I am interested in serving a:	2 year term 3 year term	า
Do you have any children presently	attending St. James Cathedral School?	
Yes No If ye	s: Name:	Grade:
	Name:	Grade:
	Name:	Grade:
I, the undersigned, certify that I mee	et all eligibility requirements indicated fo	
Signature		