

Long Range Planning Advisory Committee (LRPAC) Application Form

Name: _____

Address: _____

Street: _____

City: _____

State: _____

County of Albemarle Magisterial District _____

Telephone: _____

Cell Phone: _____

Work Phone: _____

Email Address: _____

1. Do you currently have children/grandchildren in ACPS? _____ Yes _____ No

2. If no, have you had children/grandchildren in ACPS? _____ Yes _____ No

3. How long have you resided in Albemarle County? _____

4. Have you ever been appointed to a Albemarle County School Board/ACPS Committee or Council before? If so, please explain your previous committee/council work.

5. Please indicate why you are interested in the LRPAC and appointment.

6. Below, please indicate where appropriate, certain areas of your experience and knowledge:

- | | |
|--|---|
| <input type="checkbox"/> School Construction | <input type="checkbox"/> Research |
| <input type="checkbox"/> General Construction | <input type="checkbox"/> Education/Curriculum |
| <input type="checkbox"/> Engineering | <input type="checkbox"/> Databases |
| <input type="checkbox"/> Architectural Expertise | <input type="checkbox"/> Budget Analysis |
| <input type="checkbox"/> County Planning | <input type="checkbox"/> Nonprofit and Human Services |
| <input type="checkbox"/> Land Development | <input type="checkbox"/> Public Administration |
| <input type="checkbox"/> Statistics/Demographics | <input type="checkbox"/> Federal Government/Military |
| <input type="checkbox"/> Finance | <input type="checkbox"/> Other |
| <input type="checkbox"/> County Government | |

7. Please further explain your experience(s) as indicated in #6, above, including any leadership skills, education and experiences.

8. How did you hear about the Long Range Planning Advisory Committee and the opportunity to apply for appointment?

Indicate if you are attaching additional information pertinent to this application.

- Attachments are provided
 No attachments were necessary

Thank you for your interest in applying for appointment to the Long Range Planning Advisory Committee. Should you have any questions about this Committee and/or the School Board appointment process, please contact Jennifer Johnston at (434) 972-4055 or jjohnston@k12albemarle.org.

Statement of Policy
Long Range Planning Advisory Committee (LRPAC)

It shall be the policy that any LRPAC member or officer shall abstain from the vote and/or discussion on any matter in which said member or officer may be considered to have a conflict of interest or the appearance of a conflict of interest. An abstaining declaration shall be made for the record at the beginning of any such motion or discussion and shall be recorded in the official minutes of the meeting. The same conflict of interest procedures shall apply to any LRPAC member participating in any committee action or vote.

I concur with the above policy, and affirm my intention to abide by its intent.

Signature

Name of Board Member

Date

**For Officers, Directors, Committee Members, Staff Members
And Certain Consultants**

No member of the Long Range Planning Advisory Committee (LRPAC) shall derive any personal profit or gain, directly or indirectly, by reason of his or her participation as a member of LRPAC. Each individual shall disclose any personal interest which he or she may have in any matter pending before LRPAC and shall refrain from participation in any decision on such matter.

Any LRPAC member, who is an officer, board member, committee member or staff member of an ACPS vendor, shall identify his or her affiliation with such vendor. He or she shall not participate in any decision affecting that vendor, and the decision must be made and/or ratified by the full Board of Directors.

At this time, I am a Board member, a committee member or an employee of the following organizations:

(list or attached)

Now this is to certify that I, except as described below, am not now nor at any time during the past year have been:

1. A participant, directly or indirectly, in any arrangement, agreement, investment or other activity with any vendor, supplier, or other party doing business with ACPS which has resulted or could result in personal benefit to me.
2. A recipient, directly or indirectly, of any salary payments, fees, loans, or gifts of any kind or any free service or discounts from, or on behalf of any organization engaged in any transaction with ACPS.

Any exceptions to (1) or (2) above are stated below with a full description of the transactions and of the interest, whether direct or indirect, which I have (or have had in the past year) in the persons or organizations having transactions with ACPS.

(list or attach list)

Signature: _____

Name: _____

Date: _____