

**CANDIDATE INFORMATION SHEET FOR POSITION #6, CRAWFORDSVILLE  
BOARD VACANCY**

Please fill out and return by 4:00 p.m. Monday, October 29, 2018, to the Superintendent's Office, 1920 Long Street, Sweet Home, OR 97386-2395.

Name: \_\_\_\_\_  
Last First Initial

Business Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Home Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Occupation: \_\_\_\_\_

Number of years you have been a resident in Sweet Home School District: \_\_\_\_\_

Do you meet the following qualifications? (Please answer yes or no)

1. Do you live in the District? \_\_\_\_\_
2. Are you an officer, agent, or employee of the District? \_\_\_\_\_
3. Are you a citizen of the United States? \_\_\_\_\_
4. Are you a registered voter? \_\_\_\_\_

Do you have children in the Sweet Home School District? \_\_\_\_\_

If so, what are their names and what schools do they attend?

_____	_____
_____	_____
_____	_____

For what reasons do you desire to be a member of the School Board?

\_\_\_\_\_  
\_\_\_\_\_

Have you worked on any school committees? \_\_\_\_\_

If so, which committees?

\_\_\_\_\_

Other Community and Business Activities: \_\_\_\_\_

\_\_\_\_\_

What special qualifications do you have that will help you to be a Board member?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature \_\_\_\_\_