



SCHENEVUS-WORCESTER MERGER COMMITTEE APPLICATION

Applicant Information

Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

_____ *City State ZIP Code*

Phone: _____ Email _____

Demographics

These demographics will assist the Boards in ensuring that all members of the community are represented on the committee. Choosing not to answer any of the questions in this section will not disqualify you from consideration or serving on the committee.

Did you attend either school? How long have you lived in the community? _____
YES NO

Do you have students that attend the school? YES NO If yes, what
 grades: _____

Your Age: 18-25 26-36 37-45 46-55 56-65 65+

Statement of Interest

Please provide a brief description of why you are interested in being on the merger committee.

Responsibilities of Committee Members

The main responsibility is to advise the Boards and the consultants and to communicate with the public.

Other responsibilities:

- Attend **all** committee meetings*
- Freely express your point of view
- Be a key communicator with stakeholder groups
- Be respectful of the committee and study process
- Be a positive contributing member
- Be a positive contributing member in other related committee activities

*proposed committee meeting dates are: April 27, 2020 (@ Schenevus)
May 18, 2020 (@Worcester)
June 15, 2020 (@Schenevus)
July 27, 2020 (@Worcester)
September 14, 2020 (@Schenevus)
October 19, 2020 (@Worcester)
November 16, 2020 (@Schenevus)

2021 meeting dates are to be determined.

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge. I have fully read, understand and will commit to the merger committee responsibilities.

Signature: _____ Date: _____

Printed
Name: _____

APPLICATION DEADLINE:
Friday, March 27, 2020, at 3 p.m. to
your school's District Office.