

**Bloomington Community Education Advisory Council
Membership Application Form**



One of the requirements for school districts is to have an advisory council that consist of members who represent: various service organizations; churches; public and nonpublic schools; local government, public and private nonprofit agencies serving youth and families, parents, youth, park, recreation or forestry services of municipal or local government units located in whole or in part within the boundaries of the school district. The purpose of the Advisory Council is to function in cooperation with the community education director in an advisory capacity in the interest of promoting the goals and objectives of the district’s Community Education program.

Fill in the following information and please PRINT or TYPE. Thank you.

NAME: _____ ADDRESS: _____

PHONE: Home _____ Work _____ Cell _____

AGE: H.S. Student ____ 20-30 ____ 31-45 ____ 46-60 ____ 61 & Over ____

EMAIL ADDRESS: _____

ARE YOU A RESIDENT OF BLOOMINGTON? Yes ____ No ____ If Yes, how many years? ____

DO YOU WORK IN BLOOMINGTON? Yes ____ No ____ If Yes, how many years? ____

OCCUPATION: _____

SPECIAL INTERESTS/TALENTS: (Hobbies, skills, etc.) _____

LIST GROUPS/ORGANIZATIONS YOU ARE A MEMBER OF: _____

DO YOU HAVE CHILDREN ENROLLED IN BLOOMINGTON? Yes ____ No ____
If YES, indicate grades _____

BRIEFLY (30 TO 40 words) Why do you wish to serve on the Advisory Council? What do you feel you want to contribute?

The Council meets 4 – 5 times per year from 8:00-9:30 a.m.

Does this time work for you? Yes ____ No ____

Thank you for your interest and willingness to serve on the Bloomington Community Education Advisory Council.

**Send to: Community Education Campus
2575 West 88th Street, Suite 200
Bloomington MN 55431
Attn: Mary Jelleberg
or email mjelleberg@isd271.org**