

# Caesar Rodney School District

## Citizen Budget Oversight Committee Volunteer Member Application

Please Print or Type

Name: \_\_\_\_\_

Address: (Street): \_\_\_\_\_ (Apt #): \_\_\_\_\_

(City): \_\_\_\_\_ (State/Zip): \_\_\_\_\_

Telephone numbers: (Home): \_\_\_\_\_ (Work/Cell): \_\_\_\_\_

Email address: \_\_\_\_\_ District of Residence: \_\_\_\_\_

### Please check all that apply:

\_\_\_\_\_ I am a resident of the Caesar Rodney School District

\_\_\_\_\_ I am the parent of a student attending school in the Caesar Rodney School District

\_\_\_\_\_ I am an employee of the Caesar Rodney School District

### Education History:

School Name	City/State	Dates Attended	Diploma/Degree
(High School)			
(College)			
(College)			
(Special Training/Certification)			

### Work History:

Company Name	City/State	Start and end dates of employment	Job Title / Job Duties
(Current or Most Recent Employer)			
(Prior Employer)			
(Prior Employer)			

**Please list all Volunteer / Public Service / Elected / Board positions you have held:**

Organization Name	Title / Position Held	Start and end dates of service	Duties / Responsibilities

**Please state the reason for which you are applying to serve on the Citizen Budget Oversight Committee:**

**I hereby certify that the above statements are true and correct to the best of my knowledge.**

\_\_\_\_\_  
Signature

Date

Please deliver or mail completed application to:

Dr. Ada Puzzo  
Director of Business and Finance  
CRSD District Office  
7 Front Street  
Wyoming, Delaware 19934