

**NORTH SHORE CENTRAL SCHOOL DISTRICT - BOARD OF EDUCATION  
CITIZEN'S ADVISORY COMMITTEE FOR LEGISLATIVE ACTION ("LAC")**

**APPLICATION FORM**  
*(provide additional pages as necessary)*

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Your Name: \_\_\_\_\_ Address: \_\_\_\_\_

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

Telephone: Home: \_\_\_\_\_

Work: \_\_\_\_\_ Email: \_\_\_\_\_

Mobile: \_\_\_\_\_ Recommended By: \_\_\_\_\_

*(if applicable)*

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Briefly state why you would like to serve on this Committee and what you hope to accomplish as a Committee member:

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Briefly state skills or experience you possess that would be an asset to this Committee:

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Please describe your connection(s) to the North Shore Central School District (*i.e. parent, current or former employee, committee served, interested citizen, etc.*). Please include approximate dates:

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I have read the By-Laws of "LAC" and acknowledge that, if selected, by accepting an appointment to "LAC", I will pursue the mission of the Committee and abide by its By-Laws and by District policies governing all Citizen's Advisory Committee members.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

*Please return this form to:* Board of Education  
North Shore Central School District  
112 Franklin Avenue  
Sea Cliff, NY 11579