

## **NOTICE OF VACANT CAMPBELL COUNTY BOARD OF EDUCATION SEAT**

### **Opportunity**

The Kentucky Commissioner of Education is seeking applications to be considered for appointment to the Campbell County Board of Education. You are invited to nominate yourself or someone you know who is qualified to serve on the Campbell County Board of Education representing

- Educational Division # 5

This vacancy was created by Board member resignation.

Under the provisions of KRS 160.190(2), this appointment is effective until

- The November 2018 regular election.

This is a public service position and the person appointed will not be employed by the Campbell County School District.

### **Requirements**

Board members must be:

- At least 24 years old;
- A Kentucky citizen for the last three years;
- A registered voter in the district and voter precinct # 5;
- Have a high school diploma or a GED certificate;
- Must be in compliance with anti-nepotism state laws;
- Cannot provide contract services for the school district.

### **Responsibilities**

School board members are involved primarily in the following areas:

- Developing policy that governs the operation of schools;
- Providing visionary leadership that establishes long-range plans and programs for the district;
- Hiring the district superintendent and issuing annual evaluation reports;
- Setting local tax rates and practicing vigorous stewardship to ensure that all school district funds are spent wisely.

Applications should be completed and mailed by June 13, 2017.

Interviews will be scheduled approximately 6-15 working days after this mail date. All qualified applications received before the interviews are scheduled will be considered.

Application forms for this position are available from:

- Campbell County Board of Education Office at 101 Orchard Lane, Alexandria, KY
- The Kentucky Department of Education 502-564-4474 or KDE website: <http://education.ky.gov/districts/legal/Pages/default.aspx>

All applications must be mailed directly to: Kentucky Department of Education  
Commissioner of Education  
300 Sower Blvd. 5<sup>th</sup> Floor  
Frankfort, KY 40601



## APPLICATION FOR LOCAL BOARD OF EDUCATION APPOINTMENT

Rev. Sept. 16

Name of School District _____	If county board of education, Board Division # _____		
Name _____			
_____ Last	_____ First	_____ Middle	
Address _____			
_____ Street or Box #	_____	_____ State	_____ Zip Code
Telephone _____			
_____ Business	_____ Home	_____ Cell	
OPTIONAL _____			
Racial Minority <input type="checkbox"/> Yes <input type="checkbox"/> No Hispanic <input type="checkbox"/> Yes <input type="checkbox"/> No Other Diversity _____			

1. Have you been a citizen of Kentucky for a minimum of at least the last three (3) years?  Yes  No
2. Are you an officer of, or employed by, any city, county, consolidated local government or other municipality?  Yes  No
3. Does the city or county school board where you reside presently employ you?  Yes  No
4. Do you have any relatives employed by the school district?  Yes  No  
If Yes, please indicate your relationship to them:  
 father  mother  brother  sister  husband  wife  son  daughter  
 uncle  aunt  son-in-law  daughter-in-law  Other \_\_\_\_\_
5. Do you currently hold any civil or political office or any state office requiring the Constitutional Oath of Office?  Yes  No  
If Yes, identify \_\_\_\_\_
6. Do you own or are you a stockholder in a business involved in sales or other contracts with the school board or with individual schools of the district?  Yes  No  
If Yes, identify \_\_\_\_\_
7. Do you work for a company that provides any goods or services to the school district or with the individual schools of the district? Do you receive any commissions or other benefits as a result of any contracts or business with the school district?  Yes  No  
If Yes, describe \_\_\_\_\_
8. Have you ever been fined or convicted for violation of any law? Are you now facing any charges for any violation of law?  Yes  No  
If Yes, describe \_\_\_\_\_
9. Do you serve on any county, city or joint agency government boards?  Yes  No  
If Yes, describe \_\_\_\_\_
10. Do you currently hold a leadership position with any organization that provides financial support or raises funds in the name of the district, a school in the district, or students of the district?  Yes  No

11. Please circle the highest grade of formal education your have completed:

GRADE SCHOOL	HIGH SCHOOL	COLLEGE	GRADUATE SCHOOL
1 2 3 4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4

High School Attended	Address	Dates Attended/Graduated
College/University Attended	Address	Dates Attended/Degree
Graduate Schools Attended	Address	Dates Attended/Degree
If you did not graduate from high school, have you passed a GED test?		<input type="checkbox"/> Yes <input type="checkbox"/> No

12. List schools or school related activities in which you are currently involved or with which you have had previous involvement

13. Work Experience

a.	Current Employer	Address
	Date of Employment	Duties
b.	Previous Employer	Address
	Date of Employment	Duties
c.	Previous Employer	Address
	Date of Employment	Duties

14. Please describe your understanding of and commitment to public education in Kentucky.

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SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Send application to: Kentucky Department of Education  
 Commissioner of Education  
 300 Sower Blvd, 5<sup>th</sup> Floor  
 Frankfort, Kentucky 40601

The Kentucky Department of Education does not discriminate on the basis of race, color, national origin, sex, sexual orientation, gender identity, religion, age or disability in employment or provision of services.

FOR OFFICE USE ONLY. BD \_\_\_\_\_ # \_\_\_\_\_

**RESIDENCE AND VOTER REGISTRATION  
CERTIFICATION FOR SCHOOL BOARD  
APPOINTMENT**

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**DEAR COUNTY CLERK:**  
**PLEASE COMPLETE THIS FORM AS IT APPLIES TO THE LEGAL**  
**RESIDENCE OF THE APPLICANT**

**COUNTY SCHOOL DISTRICT**

\_\_\_\_\_ who resides at \_\_\_\_\_  
Name Address

**IS A RESIDENT OF AND REGISTERED VOTER IN**  
**EDUCATION DIVISION # \_\_\_\_\_**

in the \_\_\_\_\_ County School District

**INDEPENDENT SCHOOL DISTRICT**

\_\_\_\_\_ who resides at \_\_\_\_\_  
Name Address

**IS A RESIDENT OF AND REGISTERED VOTER IN**

in the \_\_\_\_\_ Independent School District

Certified by:

\_\_\_\_\_

\_\_\_\_\_ County Clerks Office

On \_\_\_\_\_  
(Date)

Applicants should have this form completed by the County Clerk and return it to the Commissioner of Education along with their application.



**REQUEST FOR CONVICTION RECORDS-EMPLOYMENT/PROFESSIONAL LICENSE**

Request is made for any record of conviction found in the files of the Kentucky centralized criminal history record information system regarding the person identified herein. This information is released to:

Kentucky Commissioner of Education, Frankfort, KY 40601

Agency/Organization Name and Address

**ACKNOWLEDGMENT BY APPLICANT**

I am requesting that the Kentucky State Police provide the above named agency/organization with any record of conviction found in the files of the Kentucky centralized criminal history record information system. I know that I have the right to inspect my criminal history record and to request correction of any inaccurate information. If I do not exercise that right, I agree to hold harmless the Kentucky State Police and any Kentucky State Police employee(s) from any claim for damages arising from the dissemination of inaccurate information.

**APPLICANT INFORMATION** (Please Print)

NAME: \_\_\_\_\_  
First Middle Last Maiden

ADDRESS: \_\_\_\_\_  
Street City State Zip

SEX: \_\_\_ RACE: \_\_\_ DATE OF BIRTH: \_\_\_\_\_ SOC SEC NO: \_\_\_\_\_

\_\_\_\_\_  
Signature Date Witness Date

**INSTRUCTIONS:**

**Make sure all application information is complete and correct.**

Return this form along with application to: Kentucky Department of Education  
Commissioner of Education  
300 Sower Blvd, 5<sup>th</sup> Floor  
Frankfort, KY 40601