

SACHEM CENTRAL SCHOOL DISTRICT LAKE RONKONKOMA, NY

BOARD OF EDUCATION ADVISORY COMMITTEE

MEMBERSHIP APPLICATION

Please complete the below information, please type or print clearly

NAME :			
ADDRESS			
	(No PO Boxes)		
		, NY	
	Town/Village/Hamlet	Zip Code	
PHONE:			

BRIEFLY DESCRIBED EXPERIENCE AND/OR EDUCATION RELATED TO THE COMMITTEE (S) - Pleasefeel free to attach any addional information that you would like the Board to consider with your application aseparatesheet(s)