Parent Council Member Eligibility

I. Qualifications

1. Parent Council members shall be a parent, stepparent, or legal guardian of a student currently enrolled in the school and with whom the student resides.
2. Parent representatives on the council shall not be employed at the school.
3. Parent representatives on the council shall not be relatives of any employee of the school, certified or classified. (Relative shall mean father, mother, brother, sister, spouse, son, daughter, aunt, uncle, son-in-law, daughter-in-law, stepparent or grandparent)
4. Parent representatives may work at another school, but may not work anywhere in the District for the Central Office or the Bus Garage, etc.
5. Parent council members shall not be relatives of another council member on that school council.
6. Parent council members may not serve with a conflict of interest under KRS 45A, which relates to conducting business with District.
7. Parent council members must be a high school graduate or have earned a GED.

II. Job Description

1. Assist in setting policy that provides an environment to enhance student achievement and help the school meet the mission and goals established by the Commonwealth of Kentucky and the Campbell County Schools.
2. Attend monthly meetings of the council and actively participate in activities of committee.
3. Present a community and a parent viewpoint on issues.
4. Display loyalty to council and professionalism in attitude in working cooperatively toward goals of quality education.
5. Participate in training programs. (Initial 6 hour training session.)
6. Work to establish good community-school relations.
7. Abide by the Code of Ethics adopted by the school council.
8. Any other such duty as determined by the council.

III. Voting Eligibility

Only parents and/or legal guardians of the students of that school may vote to elect the parent council members.

All applications must be returned to Campbell Ridge Attn: PTO by 3:00 pm on Wednesday, May 6th 2015.

Voting will be held on Friday, May 8th 2015 from 8:00am-4:00pm if necessary.
CRES School-Based Decision Making (SBDM) Council Application Form

Name: _______________________________________________ Phone # ______________________

E-mail Address: ________________________________________________

Student(s) attending Campbell Ridge Elementary Grade

_______________________________________________ ______

_______________________________________________ ______

_______________________________________________ ______

Education: School, (Level of Achievement and year)

__________________________________________________________________________________

__________________________________________________________________________________

Community Involvement:

__________________________________________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________

How do you think you can help enhance the SBDM Council?

__________________________________________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________

Any additional information: __________________________________________________________

__________________________________________________________________________________

Nominee Signature: _______________________________________________ Date ____________