

## **CANDIDATE INFORMATION SHEET**

First Name:	Last Name:		Middle Initial:
Residence Address:	(Street)	(City)	
Mailing Address:	(Street/PO Box)	(City)	(Zip)
Home Phone:	Work Phone:	Ce	ell Phone:
Email:			
	Employer:		
Number of Years Re	siding in the Thermalito Union Eleme	entary School Distric	et:
Do you have childre	n in the District's schools? Yes	No	
If yes, which schools	s?		
Are you a registered	voter in Butte County? □ Yes □	No (Please provide a co	opy of your voter status.)
Explain why you'd li Board:	ike to serve as a member of the Therr	malito Union Elemen	ntary School District Governing
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I	Describe your professional experience, experience serving on a gove committees, school-related activities and/or experience in the commucommitment to public education and the schools of Thermalito Union	unity and how that relates to your
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Applicant Signature Date	and true to the best of my knowledge, and hereby authorize the Boardmay be required. I understand that all application materials may be o	d and District to verify this information as
	Applicant Signature	Date

<u>The deadline for returning this form is 3:00 p.m. on Friday, March 07, 2025.</u> In addition, please attach a résumé that highlights your education, work experience, and any community or business activities in which you have participated.

Submit completed candidate forms to: Superintendent's Office, 400 Grand Avenue, Oroville 95965. Materials may also be submitted in person, via Fax to (530) 538-2909, or as an email attachment to <a href="mailto:anielsen@thermalito.org">anielsen@thermalito.org</a>. Candidates will be interviewed during open session of the Special Board meeting on Monday, March 17, 2025, at 4:30p.m., at the District Office, 400 Grand Avenue, Oroville.