



502 Windsor Rd.
Champaign, IL. 61820

Education Equity Excellence (EEE) Committee Application for Committee Member

Name: _____

Street Address or P.O. Box: _____

City/State/Zip: _____

Home Telephone: _____

Cell Telephone: _____

Business Telephone: _____

E-mail Address: _____

Occupation: _____

Please answer the following questions. You may attach additional pages if you need more room to respond.

What qualifications will you bring to the EEE Committee? (For example, if you are a member of an organization that addresses education or equity issues, you are a parent of a current student etc.)

What is your interest and motivation for serving as an EEE Committee member?

Describe your professional background, education and/or experience as it relates to education equity.

Please take a moment to explain what your vision is as to how you can serve most effectively on the EEE Committee.

When you have completed the application, please:

- Attach any additional pages
- Attach your brief bio
- Attach references or endorsements that support your candidacy as an EEE Committee Member

Return this form and attachments by August 30, 2019 to:

Education Equity Excellence Committee
c/o Susan Zola, Superintendent
Champaign Unit 4 School District
502 Windsor Rd.
Champaign, Illinois 61820