

2021-2022 CAPITAL PLANNING STEERING COMMITTEE APPLICATION FORM

*Completed applications must be submitted via email to hbabb@HoustonISD.org by 5 p.m. on Sept. 17, 2021, to ensure consideration

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Applicant's Name:		Industry:		
ne Address		Nuclianda Tida / Daisian		
ome Address:		Applicant's Title/Position:		
City/State/Zip:		Employer's Name:		
Phone:		Employer's Address:		
Email:		City/State/Zip:		
Which Board of Education District do you live in?		Summary of Work Experience: (Please use last page if more space is needed)		
I II III IV V VI VII VIII IX				
Education:				
SCHOOL	SCHOOL YEARS ATT		DEGREE	
Volunteer, Civic, Professional, & Other Activities: Please list any volunteer service organizations, clubs, or pradvisory boards.	ofessional societies of which you	are a member, as well as any	titles you may have held. Please include committee and	
ORGANIZATION/COMMITTEE	YEARS OF S	SERVICE	POSITION	
Are you or any member of your household currently or hav	e you or any member of your hou	sehold previously been party	y to litigation involving HISD? Yes No	
Character Information:				
Yes No Are you presently under indictment, on pa				
	-			
Yes No Have you ever been charged with or arrest discharged)?	-	than a minor motor vehicle	violation (including offenses that have been dismissed or	
discharged)?	ed for any criminal offense other		violation (including offenses that have been dismissed or ng judgments with pending probation for any criminal	
discharged)? Yes No Have you ever been convicted, placed on p	ed for any criminal offense other oretrial diversion, or placed on an criolation)?	y form of probation (includir	ng judgments with pending probation for any criminal	
discharged)? Yes No Have you ever been convicted, placed on p offense other than a minor motor vehicle v	ed for any criminal offense other oretrial diversion, or placed on an criolation)?	y form of probation (includir	ng judgments with pending probation for any criminal	
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Are you registered or willing to register with the district's V	olunteers in Public Schools (VIF	PS) program? Yes I	No			
Reason for Serving: Explain why you want to serve on this steering committee a	and how your knowledge, skills, e	ducation, and experience	e would assist you in performing the duties of this committ	ee.		
Miscellaneous: Is there any other information that you feel is important to o	disclose or that you would like to	share in consideration o	f your application?			
Significant Accomplishments/Awards: Please use this section to highlight any significant accompl	ishments and/or awards you wo	uld like to share in consid	leration of your application.			
References: List names, addresses, and telephone numbers of at least three people who are qualified to comment on your qualifications. If you were recommended by a member of the HISD Board of Education, list the trustee as one of your references.						
NAME	ADDRESS	TELEPHONE	EMAIL ADDRESS			
I understand that I am applying for membership to the Houston Independent School District (HISD) Capital Planning Steering Committee and that the information I provide may be verified by HISD and used to help determine my eligibility for committee membership. Furthermore, I attest that I have read and understand the Capital Planning Steering						
Committee Guidelines, meet the requirements for members certify that the information provided in this form is true and		e to abide by its terms and	d conditions should I be appointed to the committee. I here	by		
Signature:			Date:			
Printed Name:						

Additional Space: (Please preface your response with the corresponding number)	