

**FERN RIDGE SCHOOL DISTRICT
COMMITTEE MEMBER APPLICATION**

Committee: Bond Oversight Committee

Applicant Name: _____

Describe your connection(s) to the Fern Ridge School District and/or community (i.e., parent, volunteer, business owner, etc.):

Understanding that there are a limited number of positions, please explain why you would like to serve on, or would be an asset to, the Bond Oversight Committee (feel free to use additional pages):

By signing below, I confirm that I am a registered voter within the Fern Ridge School District, that I agree to serve until December 2026 (unless I am unable), and that I have read and will, to the best of my abilities, support the mission and bylaws of the Bond Oversight Committee.

Signature: _____

Date: _____