

## ***Application for the Superintendent Search Screening/Interview Committee***

The Philomath school board is asking for assistance in selecting the district's next superintendent. The Board will be selecting up to **15** individuals (staff and non-staff) to assist in the application screening and interview process to be held on the dates listed below. If interested, please complete the following application. If you have additional questions, please contact Lillian Edmonds, board secretary, at 541-929-3169 or [lillian.edmonds@philomath.k12.or.us](mailto:lillian.edmonds@philomath.k12.or.us).

This completed/signed application must be returned to Lillian Edmonds **no later than January 18<sup>th</sup>** by 5 pm. Screening committee members will be **announced** by the board on January 25<sup>th</sup>. Successful applicants will be contacted **by January 31<sup>st</sup>**.

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Name: \_\_\_\_\_

Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_

Category of representation:

- |   |  |
|---|--|
| <input type="checkbox"/> High School Licensed Staff     | <input type="checkbox"/> Elementary Licensed Staff   |
| <input type="checkbox"/> High School Classified Staff   | <input type="checkbox"/> Elementary Classified Staff |
| <input type="checkbox"/> Middle School Licensed Staff   | <input type="checkbox"/> Parent/Community Member     |
| <input type="checkbox"/> Middle School Classified Staff | <input type="checkbox"/> Classified Union Rep        |
| <input type="checkbox"/> Confidential Staff             | <input type="checkbox"/> Licensed Union Rep          |
| <input type="checkbox"/> Parent/Community Member        | <input type="checkbox"/> Other _____                 |

In 25 words or less, please state your reason(s) for wanting to participate on this committee:

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### **If chosen for this committee you MUST be able to attend the following meetings...**

- February 16, 2021 at **4:30 pm** virtually.
- March 2, 2021 at 5:30 pm virtually.
- March 11 – 14, 2021, time T.B.D.

I can commit to attending these meetings. (Check one.)  Yes  No

\_\_\_\_\_  
Sign your name

\_\_\_\_\_  
Signature/Date