OAKLAND UNIVERSITY

Office of Public School Academies

School of Education and Human Services
420J Pawley Hall
Rochester, Mi 48309-4494
Tel: (248) 370-4596
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OAKLAND UNIVERSITY

Board Member Application
Personal Information

Name of Academy for which you are requesting appointment:_____ Renewing ☐

Title/Prefix: ☐ Mrs. ☐ Ms. ☐ Miss ☐ Mr. ☐ Dr. ☐ Other New Member ☐

Name: _____ _____ _____
First Middle Last

All other names you have used (maiden name, aliases, etc.)_____

Home Address: _____
City State Zip

Preferred Method of Contact: ☐ Home ☐ Work ☐ Cellular

Home Number:_____ Work Number: _____
Fax Number: _____ Cellular Number:_____
Email Address: _____

Spouse/Partner's Name: _____ _____ _____
First Middle Last

Current Employer:_____ Title: _____How long? _____

Employer's Address: _____
City State Zip

Note: If less than five years with current employer, please list previous employer also.
Previous Employer:_____ Title: _____

Employer's Address: _____
City State Zip

Are you a citizen of the United States? Yes____ No____ Are you a Michigan resident? Yes _____ No _____

Do you have children or grandchildren that attend the Academy you are applying for? Yes ___ No ___
If yes, how many? ____

Please check your highest education level:

☐ High School/GED ☐ Associates Degree ☐ Graduate Degree
☐ Trade/Business School ☐ BA or BS Degree ☐ MD, DO, JD, Ph.D., etc.

Please check each area of expertise you feel you could contribute to a board:

☐ Community Service ☐ Education ☐ Finance
☐ Fund-raising ☐ Law ☐ Management
☐ Marketing ☐ Personnel ☐ Public Relations
☐ Parent Involvement Programs ☐ Other *(please specify):* _____

Other Information

If you have prior experience working or volunteering in a field related to education or have received honors or awards, attach a resume or describe on a separate sheet of paper.

Relationship to the Academy

The University is concerned about potential conflicts of interest in a board member's relationship with the Academy. A conflict of interest occurs when your personal interests interfere, or appear to interfere, in any way, with the interests of the Academy and/or management company. A conflict of interest can arise either when you have interests that may make it difficult for you to fully perform your obligations or when you otherwise take action for your direct or indirect benefit, or the direct or indirect benefit of someone else that is inconsistent with the Academy's interests. Conflicts of interest also arise when you, or a member of your family, receive improper personal benefits as a result of your position in the Academy. You have an obligation to disclose any fact, relationship or transaction that could reasonably be viewed as a potential or actual conflict of interest.

Instructions: *Please complete the following section by indicating yes or no. If you answer 'yes' to any of the following questions, please provide an explanation on a separate sheet of paper. Please label explanations with the number of the corresponding question.*

1. Please note: in answering Yes or No to the following question you must consider past, present or future occurrences of the events detailed below involving you, your spouse/partner and immediate family members:

a. enter into contractual agreements with the Academy or the management company contracted by the Academy Yes ___ No ___

b. have ownership interest, directly or indirectly, in the management company or any other company contracting with the Academy Yes ___ No ___

c. lease or sale of real property to the Academy or the management company contracted by the Academy Yes ___ No ___

d. sale of any supplies, materials, equipment or other personal property to the Academy or the management company contracted by the Academy Yes ___ No ___

e. guarantee any loans for the Academy or provisions for any money Yes ___ No ___

f. have employment with the Academy, its management company or other contractors Yes ___ No ___

g. have a personal or business relationship with a current Academy board member, staff or faculty member Yes ___ No ___

h. provide any start-up funds to the Academy Yes ___ No ___

i. receive, directly or indirectly, any payments, gifts, or anything else of value from the Academy, its management company contracted by the Academy, or from anyone acting on behalf of either the Academy or the management company Yes ___ No ___

2. Does or will any other individual, board, group or corporations believe it has a right to control or have input on votes you will cast as a member of the Academy board? Yes ___ No ___

3. Do you currently serve as a member of the board of any public school district or public school Academy other than the board for which you are applying? Yes ___ No ___

4. Do you have any experience in, or association with, local, state or federal government (exclusive of elective public office but including advisory, consultative, honorary or other part time service or position)? If yes, please list dates of service. Yes ___ No ___

5. Have you served as a public official in the last 5 years? Yes ___ No ___
(If you are being re-nominated to the same public school Academy board, and do not serve as a public official in any other capacity, please select "No" as your response.)

6. To the best of your knowledge, are there situations not described above which may give the appearance of a conflict of interest between you or a member of your immediate family, or would make it difficult for you to discharge the duties of your office in an independent manner? Yes ___ No ___

Ethical Issues

Instructions: *Please complete the following section by indicating yes or no. If you answer 'yes' to any of the following questions, please provide an explanation on a separate sheet of paper.*

Citations

1. Have you ever been cited for a breach of ethics for unprofessional conduct, or been named in a complaint to a court, administrative agency, professional association, disciplinary committee, or other professional group? Yes ___ No ___

Agency Proceedings/Civil Litigation

2. Are you presently or have you ever been involved in administrative agency proceedings or civil litigation?
Examples include: divorce, bankruptcy, friend of the court, personal injury Yes ___ No ___

3. Has any business involving you, your spouse/partner, close family members or close business associates been part of any administrative agency proceedings or civil litigation? Yes ___ No ___

Criminal Background Disclosure

Oakland University will perform a criminal records check from local, state, and federal law enforcement agencies prior to your appointment. If the report received from these agencies does not match your representations listed below, appointment to an Academy board may be voided at the sole discretion of Oakland University.

Instructions: *Complete the section by placing your initials in the space beside option 1, 2, or 3. If you initial option 2 or 3, please provide on a separate sheet of paper what the charges were and which courts were involved.*

1. _____ Initial **I have not been** convicted, pled guilty or nolo contendre (no contest) to any crimes.

2. _____ Initial **I have been** convicted, pled guilty, or nolo contendre (no contest) to one or more crimes in either state, federal or military courts.

3. _____ Initial **I have** felony charges pending against me.

Conditions of Appointment

Instructions: *The following questions indicate the minimum conditions that must be met in order to be considered for appointments. Please complete the following section by indicating yes or no.*

1. Will you be able to attend regularly scheduled board meetings? Yes ___ No ___

2. Do you agree to complete a minimum of six (6) hours of board orientation and development during the first year of your appointment, and a minimum of three (3) hours each year thereafter? Yes ___ No ___

3. Do you agree to complete an annual conflict of interest disclosure? Yes ___ No ___

Application Verification

I recognize that all information submitted with this application or gathered by Oakland University as a result of this application becomes a matter of public record, subject by law to disclosure upon request to members of the general public. I agree to release, hold harmless and indemnify Oakland University, its trustees, officers, employees, or authorized agents from liability for the disclosure of any information it reasonably believes is true based upon my representations or resulting from this application process.

I understand that if I am appointed, I will be required and agree to complete a minimum of six (6) hours of board orientation and development during the first year of my term, and a minimum of three (3) hours each year thereafter and failure to do so may result in my removal from the Academy's Board of Directors.

I understand that if I am appointed, I will be required and agree to complete an annual conflict of interest disclosure and failure to do so may result in my removal from the Academy's Board of Directors.

I understand that Oakland University is under no obligation to appoint me or any nominee to a public school Academy board and that my appointment is subject to Oakland University's Policy of Public School Academies, including Criteria for the Evaluation of Applicants.

My signature below certifies that all information provided in this application is to the best of my knowledge, true and complete. I agree that I will immediately notify the Academy of any changes in the information provided in this Application, including but not limited to the information relating to Relationship to the Academy and Ethical Issues.

Signature **Date**

References

Please submit three (3) professional or business references **other than family or relatives, or current members of the Board for which you are applying. Note: For renewing board members, contacting references is at the discretion of the PSA Office Director.**

Name _____ Relationship to you _____

How long have you known this person? _____

Preferred Method of Contact: ☐ Home ☐ Work ☐ Cellular

Home Number:_____ Work Number: _____
Cellular Number:_____

Name _____ Relationship to you _____

How long have you known this person? _____

Preferred Method of Contact: ☐ Home ☐ Work ☐ Cellular

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