

Citizens' Oversight MEMBERS NEEDED!

The Importance of Bond Oversight Committee

The Citizens Oversight Committee (COC) is a group of volunteers who review and report on the expenditures of taxpayer money for school construction.

Voters in Santa Rosa City School Districts, Sonoma County (District) approved a pair of school improvement bonds, Measure "G" & "C," on November 8, 2022, to ensure all local schools have safe and modern classrooms, labs, and school facilities. Measure G, \$125 million, will provide funding for our local elementary schools, and Measure C, \$398 Million, will provide funding for our local middle and high schools.

The District is in the process of recruiting individuals to serve on the Citizens' Oversight Committee for Measures "C" & "G." The committee shall consist of at least seven (7) members appointed by the Board and must meet the following criteria:

- One (1) member shall be the parent/guardian of a child enrolled in the District
- One (1) member shall be both a parent/guardian of a child enrolled in the District and active in a parent-teach organization
- One (1) member active in a business organization representing the business community located in the District
- One (1) member active in a senior citizens' organization
- One (1) member active in a bona fide taxpayers association
- Two (2) members of the community-at-large

SANTA ROSA CITY SCHOOL DISTRICTS CITIZENS OVERSIGHT COMMITTEE APPLICATION

MEMBERSHIP DESIGNATION

State law requires that representatives of designated special interest organizations, if any, fill certain positions on the Citizens' Oversight Committee. Please indicate the Committee designation(s) for which you are qualified:

- Active Member of a Business Organization; (e.g. Chamber of Commerce); Organization: _____
- Active Member of Senior Citizen Group; Group Name: _____
- Active Member of Taxpayer Organization; Organization: _____
- Parent with Child(ren) Currently Enrolled in District; School(s): 2 Children @ SANTA ROSA CHARTER School ARTS
- Active Parent Member of a District Support Organization with Child(ren) Currently Enrolled in District; (e.g. District advisory council, PTA, etc.); Organization: _____
- At-Large Member of the Public: _____

General Information

Applicant Name: EDWIN SCHOLZE

Home Address: [REDACTED] SANTA ROSA, CA 95401

Telephone #: [REDACTED] E-mail: [REDACTED]

Employer Information

Name of Applicant's Employer: [REDACTED]

Employer Address: [REDACTED] SEBASTOPOL, CA 95472

Employer Telephone #: [REDACTED] E-mail: [REDACTED]

Educational Background (Response Optional) (e.g., college degree/major, vocational/ training, certificates, etc.)

Additional Information (Response Required)

Are you now or have you ever been employed by the District? If yes, please position(s) and year(s): Yes No

Position: _____ Year(s): _____

Please answer the following questions:

1. How long have you been a resident within the boundaries of the district? 33 years months
2. Have you or your child(ren) ever attended District Schools? Yes No
3. Have any of your relatives or close friends attended District Schools? Yes No
4. Do you know of any reasons, such as a potential conflict of interest (real estate, business, litigation, etc.) which would adversely affect your ability to impartially serve on the Citizens' Oversight Committee? Yes No
5. Indicate the length of appointment you are willing to accept. One-year Two-year Either
6. Explain why you would like to be appointed to this committee.

I would like to have an impact on quality education and help utilize the resources available to the district + schools for my children + their peers and to have an insight on how the district operates -

7. Describe your community service background, including participation and membership in local civic organizations. (You may attach an additional page or resume.)

8. The committee normally meets three (3) times a year. What days and times are you available?

NIGHTS + WEEKENDS ARE BEST.

Certification of Applicant

I certify that the answers and statements in this document are true and complete to the best of my knowledge and belief.

Signature _____



Date: 7-14-24

Mail application to:

Superintendent, Santa Rosa City Schools
211 Ridgway Avenue, Santa Rosa, CA 95401
Or you send completed applications to facilities@srcs.k12.ca.us
Any questions please reach out to facilities@srcs.k12.ca.us

This application is also available on the district site at: <https://www.srcschools.org/Page/4287>