COAST COMMUNITY COLLEGE DISTRICT

TRUSTEE APPLICATION

Please complete this application and attach a resume. The completed application, resume, and a letter of interest addressed to the Secretary of the Board of Trustees, Jane Burton, **must be returned by 12:00 pm on** June 3, 2022, to the CCCD Board Office c/o Jane Burton 1370 Adams Avenue, Costa Mesa, CA 92626; phone 714-438-4610. Interviews will be held the week of June 20, 2022.

NOTE: Applicants must reside in Trustee Area 5 of the Coast Community College District, which includes Newport Beach and parts of Costa Mesa. Before completing and submitting this application, please call the Registrar of Voters to determine whether you reside in Trustee Area 5.

Last Name	First Name	M.I.	Date
Home Address	Must be a street address,		
	Cell Phone		
Occupation			
	S		
Business Phone			
	you have resided in the District		

Please answer the following questions. It is important that each question be answered.

- 1. Have you worked on any public school or community college committees or participated in any school activities recently? If so, list below:
- 2. Please describe other community activities in which you have engaged.
- 3. Why would you like to be a member of the Coast Community College District Board of Trustees?

- 4. What do you see as the basic purpose of the California community colleges?
- 5. What, in your opinion, is the role of the Board of Trustees in a community college district?
- 6. What should be the relationship between the Board members and the administration in the handling of college concerns?
- 7. What do you see as the strengths of the Coast Community College District?
- 8. What do you see as the areas most needing improvement in the Coast Community College District?
- 9. Do you or does anyone in your immediate family or your employer contract with or do business with the district? If yes, please state all pertinent facts.
- 10. Please list the names, telephone numbers, and email addresses of three persons who can provide information on your qualifications for service as a trustee.

___ (Check if applicable) I am related to a current employee of the District. If yes, name of employee and your relationship_____

I understand that I may not serve as a member of the board while an employee of the District.

I certify that I meet all eligibility requirements. To be eligible, an individual must be at least 18 years old; must be a resident of the Trustee Area 5; must be a registered voter, and must not be disqualified from holding civil office by the Constitution or any law of the state.

Signature: _____

Date: _____