**Polaris Charter Academy**

**Associate Board Candidate Application**

A unique opportunity is being offered by Polaris Charter Academy for talented, community oriented individuals, to support education in Chicago, expand their personal and professional networks and enhance their role as a civic leader, through service on the Polaris Charter Academy Associate Board! Illinois’ first public Expeditionary Learning elementary school looks forward to hearing from YOU.

Associate Board membership is for a period of up to two (2) years.

Please complete, sign and submit this application to:

Carolyn Talaske, Development Manager, ctalaske@pcachicago.org

**Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

First MI Last Familiar Name

**Residence/Contact Information**

Home address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Preferred phone ( ) Work ( ) Residence \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Preferred email ( ) Work ( ) Residence \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Resume/CV**

[PLEASE ATTACH RESUME AND/OR CURRICULUM VITAE AND SUBMIT WITH THIS

APPLICATION]

**How did you hear about the PCA Associate Board?**

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**Please describe any community service experience and/or involvement you have had with**

**non-profit organizations** (business, civic, community, fraternal, political, professional,

recreational, religious, social):

Organization Role/Title Dates of Service

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**How do you feel you would be an asset to the Polaris Charter Academy Associate Board?**

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**What would you like to gain from your experience on the Associate Board?**

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**Describe you experience and/or interest in education.**

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**Which PCA Associate Board committee would you prefer to join:**

☐ **FUNDRAISING**

☐ **COMMUNITY ENGAGEMENT**

☐ **BOTH**

**Please tell us anything else you would like us to know:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***I understand the responsibilities related to potential membership on the PCA Associate Board, and authorize for a background check to be completed should I be working with students.***

**Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**