

**650 West Easterday Avenue**

**Sault Ste. Marie, MI 49783**

Public School Academy Board Application

**A Commitment to Excellence in Education**

**Thank you for your willingness to serve as a public school academy board member. The boards of these schools play a vital role in their future. If you are appointed to serve on an academy board, your role will be to set policy, maintain the school’s vision, and ensure that the school complies with its charter and applicable law.**

**We have designed this application to be straightforward, while collecting the detailed information needed to appoint effective board members.**

**Please forward application to:**

**The Field Officer for your Academy**

 **LSSU Charter Schools Field Officer Team**

**Garnet Green, Supervising Field Officer**

**(248) 961-4601,** **ggreen3@lssu.edu**

 **Advanced Technology Academy**

 **Macomb Montessori Academy**

 **Momentum Academy**

 **WAY Academy Detroit**

**Lynn Methner, Supervising Field Officer**

**(906) 440-6649,** **lmethner1@lssu.edu**

 **Bay City Academy**

**Charlton Heston Academy**

 **Concord Academy—Boyne**

 **Concord Academy—Petoskey**

 **Detour Arts & Technology Academy**

 **Grand Traverse Academy**

**Joe Thienes, Supervising Field Officer**

**(616) 204-1308,** **jthienes@lssu.edu**

 **iCademy**

 **Innocademy**

 **Innocademy Allegan Campus**

 **Ridge Park Charter Academy**

**Melissa Weisberger, Supervising Field Officer**

**(248) 563-7641,** **mweisberger@lssu.edu**

 **American International Academy**

 **Detroit Service Learning Academy**

 **Regent Park Scholars Academy**

 **Tipton Academy**

 **WAY Academy Flint**

 

**Application for Appointment to the Board of a Public School Academy**

**I hereby request appointment to the board of the following public school academy:**

**Name of Academy:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Personal Information

**Full Name** *(include middle name)*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Home Address**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Street/P.O City, State, Zip

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

**Date of Birth\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Employer’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Employer’s Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**County:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Home Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Work Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Spouse’s Full Name:**

**Do your children attend this academy?** **If so, list their ages:**

**Please check (✓) your highest education level:**

### High School/GED \_\_\_\_\_\_Associate’s Degree \_\_\_\_\_\_BA or BS Degree

### \_\_\_\_\_\_Master’s Degree \_\_\_\_\_\_\_Doctoral or Professional Degree

### \_\_\_\_\_\_Trade/Business School \_\_\_\_\_\_\_Other \_\_\_\_\_\_\_\_\_\_

**Please check each area of expertise you would contribute to the Board:**

 Community Service Education Finance

#### Fund Raising Law Management

 Marketing Human Resources

\_\_\_\_\_ Public Relations \_\_\_\_\_Parental Involvement Programs

\_\_\_\_\_ Others (please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Will you be able to attend regularly scheduled Board meetings?** Yes or No

## Public School Academy Board Qualifications Guide

**Instructions:** Use a separate sheet of paper to explain your experience in the following categories.

* **Government.** Experience in local, state or federal governmental agencies and departments, including advisory, consultative, honorary or other service or positions. Include dates of services.
* **Elected Public Office.** Include dates of service.
* **Honors and Awards.** Include scholarships, fellowships, honorary degrees, honorary society memberships and recognition for outstanding service or achievements.
* **Employment Experience.** Include job and career information
* **Professional Licenses and Certifications.** List complete titles and license numbers.
* **Volunteer Experience.** Include work done and leadership positions.
* **Miscellaneous.** Explain any additional points, including special skills that qualify you for the position.
* **References.** If you are applying for your first term as a member of this board, list three individuals who would be willing to talk with Lake Superior State University regarding your qualifications. Include their names, addresses, business and home telephone numbers and their relationship to you.

# Relationship to the Public School Academy

**Instructions:** 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. Do or will you or your spouse have any contractual agreements with the academy? Yes or No
2. Do or will you, your spouse, or any member of your immediate family have any ownership interest in any management company or any other company contracting with the academy? Yes or No
3. Did or will you or your spouse lease or sell property to the academy? Yes or No
4. Did or will you or your spouse sell any supplies, materials, equipment or other personal property to the academy? Yes or No
5. Have you or your spouse guaranteed any loans for the academy or loaned it money? Yes or No
6. Are or will you, your spouse or any member of your immediate family or household be employed by the academy, its management company or its other service providers? Yes or No
7. Did you or your spouse provide any start-up funds to the academy? Yes or No
8. Did or do you or your spouse, or other member of your immediate family, have ownership interest, directly or indirectly, in any corporation, partnership, association or other legal entity which would answer “yes” to any of the questions 1 – 7?

Yes or No

1. Does any other board, group or corporation believe it has a right to control or have input into votes you will cast as a member of the public school academy board? Yes or No
2. Do you currently serve as a member of the board of any public school district or public school academy? Yes or No
3. Do you currently serve as a public official? Yes or No
4. To the best of your knowledge, are there situations not described above which may give the appearance of a conflict of interest between you and the academy, or which would make it difficult for you to discharge your duties or exercise your judgment independently on behalf of the academy? Yes or No

## Ethical Issues

**Instructions:** If you answer “yes” to either of the following questions, please provide an explanation on a separate sheet of paper.

**⬝ Citations.**

 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 or No

**⬝ Agency Proceedings/Civil Litigation.**

 Are you presently or have you ever been involved in administrative agency proceedings or civil litigation during the past five years? Yes or No

 Has any business involving you, your spouse, close family member or close business associates been part of any administrative agency proceedings or civil litigation relevant to the board member position? Yes or No

# Criminal Background Check

Public School Academy Board members are public officials appointed by the Lake Superior State University Board of Trustees. The University Board requires that a personal background check, including a criminal record verification, for each nominee.

Instructions: Complete this section by placing your initials in the space beside option 1, 2 and/or 3. If you initial option 2 or 3, please provide the requested details.

1. I have not been convicted of, nor pled guilty or nolo contendere (no contest) to any crimes.
2. I currently am charged with one or more crimes.

*(On a separate sheet of paper, specify what the charges are and which courts are involved.)*

1. I have been convicted of or pled guilty or nolo contendere to one or more crimes.

*(On a separate sheet of paper, specify what the charges were and which courts were involved.)*

I understand that:

* Lake Superior State University must request or cause a criminal records check on me from local, state, or federal law enforcement agencies.
* Until that report is received and reviewed by Lake Superior State University, my nomination for appointment will not be processed.
* If the report received from the local, state, or federal law enforcement agencies is not the same as my representation(s) above or attached hereto respecting the absence of any conviction(s) or any crimes of which I have been convicted, my nomination for appointment is voided at the sole discretion of the Lake Superior State University Board of Trustees or its designee.

 **Signature** **Date**

## Public School Academy Board Application Verification and Consent

My signature below verifies that all information provided in this application is true and complete.

I consent to the release of information concerning my ability and fitness by my employer(s), schools, law enforcement agencies and any other individuals and organizations, subject to any restrictions that I have included, to Lake Superior State University, its Provost’s Office and the University’s legal counsel. I specifically authorize LSSU to do a criminal background check on me with the applicable local, state and federal law enforcement agencies.

I recognize that all information submitted with this application or gathered by LSSU 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 will hold LSSU, it Board of Trustees, officers, employee or authorized agents harmless 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 Lake Superior State University is under no obligation to appoint me or any nominee to the public school academy board.

I am a citizen of the United States of America.

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

**Signature** **Date**

Lake Superior State University

Charter School Office

Verification of U.S. Citizenship

PSA Board Member

Name of Academy\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Board Member\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Last First Middle Initial (Maiden)

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Street Name and Number

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

 City State Zip Code

**I attest that I am a citizen of the United States of America and a resident of the State of Michigan.**

 **Board Member’s SIGNATURE** **DATE**

Charter School Office Verification

**I have examined the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_presented by the above**

Name of document

**named board member. The document appears to be genuine and to relate to the person named and to the best of my knowledge the person is a U.S. citizen and resident of the State of Michigan.**

Signed, Name, Title LSSU Charter Schools Office DATE

Acceptable documents as proof of citizenship include the following:

* Original or certified copy of birth certificate issued by a State, county, municipal authority or territory of the United States bearing an official seal.
* Native American tribal document
* U.S. Citizen ID Card (Form I-197)
* Michigan Enhanced Driver License
* Michigan REAL ID
* U.S. Passport or U.S. Passport Card