CLEAR CREEK EDUCATION FOUNDATION BOARD OF DIRECTORS NOMINATION FORM

I. NOMINEE CONTACT INFORMATION

First Name		Initial		Last N	ame		
Company (if applicable)							
Address:							
City/State/Zip:							
Telephone	Offi	ce:		Ce	d:		
Email Address							
II. EXPERIENCE AND BAC	KGR	OUND					
Current employer or asso	ciatio	n:					
Position:							
Education Level			High School College Degree Graduate Degree Post Graduate Degree CCISD Grad (year/scho	ol)			
Professional Experience:							
Other Relevant Experience	ce: (<u>fu</u>	ındraisir	ng, personal, voluntee	r, leaders	hip roles,	etc.)	
Has the nominee ever se	rved (on a Boa	ard of Directors?	Yes	No	Don't know	
If yes, name of organization	on(s)	and in v	what capacity:				

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Nominee Name:

Why might this nominee want to serve	on the Board of Directors	•
Has this nominee been involved financi greater than \$50,000 from CCISD would		
V. OTHER INFORMATION		
s there any additional information that	should be considered in e	evaluating this potential nominee
attend?	_	h at 8:00 am? Could nominee
	Wednesday of each mont	h at 8:00 am? Could nominee
nttend?	_	Clear Creek Clear Springs Clear Falls
Yes Nominee's Residence High School	No Clear Brook Clear Lake Other:	Clear Creek Clear Springs
Nominee's Residence High School Attendance Zone:	Clear Brook Clear Lake Other: Define:	Clear Creek Clear Springs Clear Falls
Nominee's Residence High School Attendance Zone: Nominee's Gender:	Clear Brook Clear Lake Other: Define: Male African American Caucasian Other	Clear Creek Clear Springs Clear Falls Female Asian Hispanic

Submit completed nomination form to:

Clear Creek Education Foundation

Attn: Jennifer Garcia, Executive Director

P.O. Box 1631

League City, Texas 77574 or via email to: jggarcia@ccisd.net