

Ipswich Public Schools Payne Grant Allocations Committee

Application Form

Name _____ Date _____

Street Address _____

Primary Phone _____ Cell Phone _____

Email Address _____

Connection to the Ipswich Public Schools _____

Briefly state your interest in being appointed to the Payne Grant Allocations Committee.

Briefly describe your present and past community involvement and/or interests (i.e. voluntary, social, business, professional etc).

Briefly describe any particular skills, background, education, training or experience that you would bring to the Payne Grant Allocations Committee.

Are you able to commit to a minimum of **15** hours of time for meetings to review and discuss proposals?

Yes No I'm not sure at this time.

Signature: _____

**Please return your application by noon
FRIDAY, APRIL 26, 2019
to:**

Ipswich School Committee
Ipswich Public Schools
1 Lord Square, Ipswich, MA 01938

Your interest in serving on this committee is greatly appreciated. After this application is reviewed, you will be notified as to the School Committee's decision regarding appointment to this committee. Again, thank you for your interest in the long-term welfare of the Ipswich Public Schools.

Adopted: April 25, 2013