APPLICATION FOR MEMBERSHIP
ON STATE BOARD OF EDUCATION COMMITTEES, COUNCILS, AND CONSORTIUMS

The purpose of this form is to obtain general information for use in appointing members of committees, councils, and consortiums approved by the State Board of Education. If you have recently prepared a biography or resume, please attach it to this form.

COMMITTEE, COUNCIL, OR CONSORTIUM
APPOINTMENT DESIRED: Nebraska Council on Teacher Education (NCTE)

PERSONAL INFORMATION

NAME (first) (middle initial) (last)

RESIDENCE (street) (city) (zip) (county)

BUSINESS/SCHOOL ADDRESS (street) (city) (zip)

TELEPHONE (residence) (business/school)

Email Address: _____ Occupation: _____

Do you hold a current Nebraska teaching certificate? ☐ yes ☐ no

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☐ ***If the box at the left is checked, please provide the following information, check the category(ies) which you can represent, and complete pages 2 and 3 of this form.*** The legislation authorizing creation of this council or committee directs that the membership reflect the diversity of the population of the state with regard to race, ethnicity, gender, and disability characteristics. Information provided in this section will assist our staff and the State Board in making selections.

Gender: ☐ male ☐ female Racial/Ethnic background: _____

Disability: _____

Check category(ies) which you can represent:

Teachers:
- __ Elementary
- __ Middle school/Junior high
- __ Secondary
- __ Postsecondary
- __ Private Schools
- __ Parents/Patrons
- __ Organizations serving young children
- __ Local boards of education
- __ Community-based organizations
- __ Other(s) (describe): _____

Administrators:
- __ Superintendent
- __ Other
- __ Principal

OR

☐ ***If the box at the left is checked, please complete the attached SUPPLEMENTAL QUALIFICATIONS FORM in addition to pages 2 and 3 of this form.*** The legislation authorizing creation of this council or committee directs that the membership meet certain qualifications relevant to the charge of the council.

ADDITIONAL INFORMATION

Please provide additional supportive information about yourself and your experiences. Include membership of organizations related to this position, membership of any board, commission, council, or committee you have served in the past; honors or awards received; other volunteer activities.

Please explain your interest in serving on this council/committee:

EMPLOYMENT

List employment history, beginning with current experience; include volunteer activities. A resume or additional information is optional. ***If you are a parent/patron applicant, completion of this section is optional.***

EDUCATION

List schools attended (including high school); include location, dates, major field of study or degree received. ***If you are a parent/patron applicant, completion of this section is optional.***

REFERENCES

List names, addresses, and telephone numbers of at least three persons who may be contacted for references. ***If you are a parent/patron applicant, completion of this section is optional.***

_____

_____

_____

_____

_____

_____ _____

Signature of applicant Date

Return completed form by _____ to:

Crystal Humm, NDE
Office of Accreditation, Certification, and Approval
500 So. 84th, 2nd Floor
Lincoln, NE 68510-2611
crystal.humm@nebraska.gov

Questions should be directed to Crystal Humm at 402-480-0036 or Jim Kent at 402-314-4432.

STATE STAFF USE ONLY

STATE BOARD OF EDUCATION REPRESENTATIVE AND DISTRICT

RECOMMENDING STAFF PERSON

Appointment *approved* at _____ State Board of Education meeting.

Appointment *not approved* at _____ State Board of Education meeting.