



**ELECTED MEMBER VACANCY APPLICATION TO SERVE ON  
THE ACHIEVEMENT SUBCOUNCILS OF  
THE LEARNING COMMUNITY OF DOUGLAS AND SARPY COUNTIES**

*Applicant must reside within the boundaries of the Achievement Subcouncil to which he/she is submitting his/her candidacy.*

Name:		
Home Address:		
Home Phone:	E-mail:	
Business:		
Business Address:		
Business Phone:	Business E-mail:	
Please indicate which Achievement Subcouncil you reside in:		
<input type="checkbox"/> Achievement Subcouncil 1	<input type="checkbox"/> Achievement Subcouncil 3	<input type="checkbox"/> Achievement Subcouncil 5
<input type="checkbox"/> Achievement Subcouncil 2	<input type="checkbox"/> Achievement Subcouncil 4	<input type="checkbox"/> Achievement Subcouncil 6
Please indicate which School District you reside in:		
<input type="checkbox"/> Bellevue Public Schools	<input type="checkbox"/> Millard Public Schools	<input type="checkbox"/> Westside Community Schools
<input type="checkbox"/> Bennington Public Schools	<input type="checkbox"/> Omaha Public Schools	
<input type="checkbox"/> DC West Community Schools	<input type="checkbox"/> Papillion-La Vista School District	
<input type="checkbox"/> Elkhorn Public Schools	<input type="checkbox"/> Ralston Public Schools	
<input type="checkbox"/> Gretna Public Schools	<input type="checkbox"/> Springfield Platteview Community Schools	
Do you currently hold any public office?		<input type="checkbox"/> Yes <input type="checkbox"/> No
If "Yes," please list:		
Have you ever been convicted of a felony in this, or any, state? <input type="checkbox"/> Yes <input type="checkbox"/> No (Nebraska State Revised Statute 29-112)		
<b>REQUIRED</b> – Please attach a cover letter and your resume. List applicable education and/or experience:		
How would your experience benefit the Achievement Subcouncil area you reside in and the Learning Community Coordinating Council?		

List any additional qualifications you feel would benefit the Achievement Subcouncil and the Learning Community Coordinating Council:

I hereby certify I am qualified to hold the position for which this application is made. Furthermore, I hereby authorize the Learning Community of Douglas and Sarpy Counties to investigate the truthfulness of all of the information I have provided in this application. I understand that any misrepresentation or omission of information requested in this application is cause for disqualification. **Please Note:** Application materials may be subject to disclosure under the Nebraska Public Records Act.

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**APPLICANT SIGNATURE**

**PLEASE NOTE:** Application needs to be notarized.

STATE OF NEBRASKA )  
 )  
COUNTY OF \_\_\_\_\_ )

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me the undersigned, a Notary Public duly commissioned and qualified in and for the State of Nebraska, personally came, \_\_\_\_\_, to me known to be the identical person whose name is subscribed to the foregoing instrument, and acknowledged the execution thereof to be his/her voluntary acts and deeds.

Witness my hand and notary seal the day and year last above written.

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**NOTARY PUBLIC, STATE OF NEBRASKA**

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Please return your application, cover letter and resume to the office of the Learning Community of Douglas and Sarpy Counties • 1612 North 24<sup>th</sup> Street • Omaha, NE 68110 • Office: 402.964.2405 • Fax: 402.964.2478

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