

SCHOOL DISTRICT OF MONROE BOARD OF EDUCATION CANDIDATE BIOGRAPHICAL SKETCH

Name:	Birthdate:	
Address:	Work Phone:	
	Home Phone:	
Occupation:		
Place of Employment:		
Spouse:	Occupation:	
Children	Birthdate	Grade

Where did you grow up?

When did you move to the School District of Monroe?

What civic and church activities are you involved in?

Do you have a special interest in our schools? If so, what?

What do you feel you can contribute to the School District of Monroe through being a member of the Monroe Board of Education?