



Public School Academy Board Member Appointment Application

Academy Name: _____

Full Name: _____
First
Middle
Last

Alias/Maiden Name: _____

Home Address: _____
Street
City
State
Zip
County

Employer: _____ Position/Job Title: _____

Employer Address: _____
Street
City
State
Zip
County

Home Number: _____ Work Number: _____

Email: _____

Spouse's Name: _____
First
Middle
Last

Are you a United States citizen? Y N

Are you a Michigan resident? Y N

Do you have children who attend the Academy? Y N

Highest educational degree obtained:

- High School/GED
 Associate Degree
 Bachelor's Degree
 Master's Degree
 Doctor/Doctorate Degree
 Trade/Business School

Do you hold any professional licenses? Y N

If yes, please list all professional licenses: _____

Personal References:

Name: _____ Phone: _____

Relationship to you: _____

Name: _____ Phone: _____

Relationship to you: _____

Name: _____ Phone: _____

Relationship to you: _____



CONFLICT OF INTEREST: For the following questions, all yes answers require detailed responses. Use a separate piece of paper if necessary.

1. Will you or your spouse have any contractual agreement with the Academy?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Will you or your spouse have any ownership interest in any management company contracting with the Academy?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Have you or your spouse guaranteed any loans for the Academy?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. Will you or your spouse be leasing or selling any real property to the Academy?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5. Will you or your spouse be employed at the Academy, either as an employee of the Academy or as an employee of the management company contracted by the Academy?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6. Will you or your spouse sell any supplies, materials, equipment, or other personal property to the Academy?	<input type="checkbox"/> Yes <input type="checkbox"/> No
7. Have you or your spouse provided any start-up funds to the Academy? If yes, how much money?	<input type="checkbox"/> Yes <input type="checkbox"/> No
8. Do you or your spouse, or other close family member have ownership interest, whether direct or indirect, in any corporation, partnership association, or other legal entities which will enter into a contract with the Academy?	<input type="checkbox"/> Yes <input type="checkbox"/> No
9. Please describe any other matter in which you are involved which could be considered incompatible or a conflict of interest with the discharge of the duties in your position as an Academy board member. Describe anything incompatibility or conflict of interest that may impair your independence of judgement or action in the performance of the duties of that position. If there is no such matter, please state that.	



ETHICAL MATTERS: For the following questions, all yes answers require detailed responses. Use a separate piece of paper if necessary.

10. Have you ever been cited for a breach of ethics for unprofessional conduct?	<input type="checkbox"/> Yes <input type="checkbox"/> No
11. Have you ever been named in a complaint to any court, administrative agency, professional association, disciplinary committee, or other professional group?	<input type="checkbox"/> Yes <input type="checkbox"/> No
12. Have you ever been convicted of or entered a plea of guilty or nolo contendere or forfeited collateral for any criminal violation other than minor traffic offense? Please note that minor traffic offenses do not include the Michigan offenses of operating under the influence of liquor, operating while impaired, reckless driving, or the equivalent offense in other states.	<input type="checkbox"/> Yes <input type="checkbox"/> No
13. Are you now under charges for any violation of the law?	<input type="checkbox"/> Yes <input type="checkbox"/> No
14. Have you ever been convicted by any military court?	<input type="checkbox"/> Yes <input type="checkbox"/> No
15. Have you ever been imprisoned, been on probation, or been on parole?	<input type="checkbox"/> Yes <input type="checkbox"/> No
16. Are you presently, or have you ever been a party of interest in any administrative agency proceedings or civil litigation which is related in any way to the position to which you seek to be appointed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
17. Has any business in which you, your spouse, close family member, or business associate are or were an officer, director, or partner been a party to any administrative agency proceedings or civil litigation relevant to the position to which you seek to be appointed? Please note you need only consider proceedings and litigation that occurred while you, your spouse, close family member, or business associate in an office of that business.	<input type="checkbox"/> Yes <input type="checkbox"/> No



18. Please provide any additional information, favorable or unfavorable, which you feel should be considered in connection with your appointment.	
19. Have you ever had any previous government appointment?	<input type="checkbox"/> Yes <input type="checkbox"/> No
20. List all government experience at the local, state, or federal level. This excludes elective public office, but includes advisory, consultative, honorary, in other part time service or position. Please include the dates of service.	
21. List all elective public offices you have sought and/or held with dates of service.	
22. Will your service in another public office constitute a conflict of interest with your duties as an Academy board member?	<input type="checkbox"/> Yes <input type="checkbox"/> No
23. List all scholarships, fellowships, honorary degrees, honorary society memberships, and any other special recognition for outstanding service or achievement.	
24. Do you know of any person or group who might take overt or covert steps to attack, even unfairly, your appointment?	<input type="checkbox"/> Yes <input type="checkbox"/> No
25. If you have additional abilities, other than those listed above, that qualifies you to hold the position as Academy board member and is relevant to this position, please list them.	



Criminal Background Check Consent and Certification

First Name Middle Name Last Name Suffix

Date of Birth: _____ Gender: _____

Race: African American American Indian or Alaskan Native
 Asian or Pacific Islander Caucasian Other/Unknown

Have you ever lived outside the United States? Y N

Have you ever resided outside the state of Michigan in the last ten years? Y N

If yes, please provide the address(es) below:

Street City State Zip County

Street City State Zip County

Street City State Zip County

I consent to the release of information concerning my ability and fitness for the position to which I seek to be appointed by my employer(s), school, law enforcement agencies, and other individuals and organizations, subject to any restrictions which I have included, to Bay Mills Community College Board of Regents and the Community College’s Legal Counsel. I specifically authorize Bay Mills Community College Board of Regents to do a criminal background check on me with the applicable state and federal law enforcement agencies.

By my signature I assert and certify that the information provided in this statement is, to the best of my knowledge, true and accurate.

Signature _____ Date _____