



STEERING COMMITTEE APPLICATION

NAME: _____

SCHOOL DISTRICT: _____

SCHOOL DISTRICT ADDRESS: _____

SCHOOL DISTRICT ENROLLMENT _____ SCHOOL DISTRICT REGION _____

TELEPHONE: _____ FAX: _____

EMAIL ADDRESS: _____

SCHOOL DISTRICT POSITION: _____

STEERING COMMITTEE POSITION DESIRED: STUDENT FINANCE HUMAN RESOURCES
 TECHNOLOGY FOOD SERVICE HEALTH

Applicants should have a working knowledge of the software package in the area in which they are applying.

Explain what your job is within your district. _____

How many years have you been involved with Skyward? _____

With which software module(s) and/or Hardware are you familiar and what is your area of expertise in relation to Skyward? _____

Why would you like to be on the Steering Committee? _____

Committee members are employees of a Texas Skyward School District who volunteer their time and labor. Being a part of the Steering Committee is a **three** year commitment of time and expense. As a TSUG member you will be assisting in the review process of all RFE's submitted for the state of Texas. Each TSUG member also plays a vital role in the planning and execution of TSUG's annual conference. The TSUG steering committee meets **four** times per year. Two meetings are held in the Greater Austin area and two in the Greater Dallas area. Attendance is critical to the success of TSUG. If you are interested in serving, and you have the assurance of your supervisor that they are aware of the value of your contribution to the Steering Committee and will grant you release time, please return this application to TSUG Membership Coordinator via email at webmaster@tsug.org.

Applicant Signature

Date



SUPERVISOR LETTER OF ENDORSEMENT

DATE: _____

Name of Nominee: _____

I am recommending this nominee because I feel he/she will be a benefit to the Texas Skyward User Group Steering Committee.

STEERING COMMITTEE POSTION DESIRED: STUDENT FINANCE HUMAN RESOURCES
 TECHNOLOGY FOOD SERVICE HEALTH

I know and understand that if he/she becomes a member of TSUG he/she will be required to attend four meetings annually as well as the annual conference for a term of three years. I recognize the value of the Steering Committee's contributions toward our district as well as all Texas Users.

Signed _____

Title: _____

School District: _____

Address: _____

City, State, Zip: _____

Phone: _____