

**INFORMATION SHEET FOR METROPOLITAN SCHOOL BOARD NOMINEES**

**Appearing before The Rules-Confirmations-Public Elections Committee  
of the Metropolitan Council**

*For each question below, if you require additional space beyond what is provided, please use a separate sheet of paper, identifying the number of the question being answered.*

1. Full Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

2. E-mail address (if available): \_\_\_\_\_

3. Are you a qualified, registered voter in Davidson County, Tennessee? Yes\_\_\_ No \_\_\_

4. Are you at least twenty-five (25) years of age? Yes\_\_\_ No \_\_\_

5. Have you been a resident of the area of the Metropolitan Government of Nashville and Davidson County for a period of five (5) years? Yes\_\_\_ No \_\_\_

6. Have you been a resident of the school district for which you are seeking appointment for at least one (1) year? Yes\_\_\_ No \_\_\_

7. Do you currently hold any other elective or appointive public office? Yes\_\_\_ No \_\_\_

8. If appointed, are you willing to serve on the Metropolitan School Board? Yes\_\_\_ No \_\_\_

9. Residential address (physical, not a P.O. Box): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

10. What is your Metropolitan Council district? \_\_\_\_\_

**PROFESSIONAL / EDUCATIONAL / PUBLIC SERVICE BACKGROUND**

11. Completed educational background: \_\_\_\_\_  
\_\_\_\_\_

12. Place of business: \_\_\_\_\_

13. Business phone and fax: \_\_\_\_\_

14. Business address, city, and zip code: \_\_\_\_\_

15. Please describe your professional/occupational experience: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

16. Please describe your educational background: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

17. Please describe your previous experience in public service: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

18. Please describe any potential conflict of interest your appointment may present  
\_\_\_\_\_  
\_\_\_\_\_

19. Please describe (a) your understanding of the duties and responsibilities of the Metropolitan Board of Education, and (b) the credentials you possess which qualify you to serve thereon: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please attach hereto a copy of your current resume.**

20. Have you read the [Acknowledgement of Ethical Rules](#)? Yes\_\_\_ No\_\_\_

21. Will you agree to attend Metro Government's cultural diversity/sexual harassment training within three (3) months of this appointment?

22. What is your Council district? \_\_\_\_\_

23. Are you a lobbyist? Yes\_\_\_ No\_\_\_

The following questions are optional and are for demographic purposes only. Any information provided will be a matter of public record:

24. What is your gender?

25. What is your race or ethnicity?

26. Do you wish to openly identify as LGBTQ? Yes\_\_\_ No\_\_\_

*Failure of a candidate to return a completed questionnaire to the Metropolitan Clerk's Office within three (3) business days after the candidate's nomination is received shall result in the candidate's nomination, or failure to attend the interview of the Rules, Confirmations, and Public Elections Committee shall be deemed automatically withdrawn.*

\_\_\_\_\_  
Signature of Nominee

\_\_\_\_\_  
Date