CHIPPEWA VALLEY SCHOOLS

Reproductive Health Advisory Board

Membership Application

Date: _____

Name: _____

Telephone: _____ Work Phone: _____

Address: _____ City: _____

Occupation: _____ Email: _____

Please check all categories that apply:

Parent:

☐ Elementary Parent

☐ Middle School Parent

☐ High School Parent

Ages of children: _____

Other Roles:

☐ Clergy

☐ Community Health Professional

☐ Educator

☐ Student Grade: _____

1. Overall, what are your thoughts and ideas regarding health and reproductive health education within public schools?

_____

_____

_____

2. Do you have any comments about reproductive health education within this district in particular?

_____

_____

_____

3. Why are you interested in serving on this advisory board?

_____

_____

_____

4. What specific issues do you believe this advisory board should address? Please list in order of priority.

_____

_____

_____

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5. What assets, background, past experience, useful knowledge, etc., do you have that may assist this committee?

_____

_____

_____

6. Are you willing to attend approximately four evening meetings per school year for a period of three years?

☐ YES ☐ NO

Information for the Applicant

The Reproductive Health Advisory Board has been charged with the following responsibilities:

1. Review and recommend instructional materials, guest speakers, and programs which are a part of the comprehensive reproductive health program.
2. On a regular basis, review methods of instruction and assist in evaluation of the comprehensive reproductive health program, reporting to the Board of Education as required.
3. Work closely with the school administration in the implementation of this program.
4. Review policies and/or State guidelines and make recommendations to the Board of Education for needed changes.
5. Perform other duties as suggested by the Reproductive Health Supervisor, Board of Education, or the Superintendent of Schools.

A reasonable effort shall be made to ensure that the advisory board shall consist of members representing a cross-section of community viewpoints.

Thank you for your interest. When there is an appropriate vacancy on the Reproductive Health Advisory Board, you will be contacted.

Please return your completed form to:

John Belasco | jbelasco@cvs.k12.mi.us

21051 21 Mile Road, Macomb, MI 48044