



# Board of Directors Application

The HCCA Board of Directors would like to thank you for applying to serve on the board. Anyone who has a student enrolled at Holy Cross Christian Academy for the following school year can be appointed to the Board. The Board of Directors follows a self-perpetuating model, which means that the current board will review the applicants and elect the successors from potential candidates. The board consists of nine people, each serving for three years.

If you are appointed to the Board of Directors you will be required to complete a criminal background check.

Applications must be filled out completely. Please answer all questions in the space provided. Applications may be delivered to the school office or mailed to:

**Holy Cross Christian Academy  
Board of Directors  
P.O. Box 3113  
Burleson, Texas 76097**

If there are further questions please call the school office and the Administrator will put you in touch with a current board member.

## I. Personal Data

1. Applicant Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Applicant Spouse: \_\_\_\_\_

2. Current Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

3. How long have you lived at this address? \_\_\_\_\_ years.

4. What County do you reside? \_\_\_\_\_

5. How many children do you currently have at HCCA? \_\_\_\_\_

Names: \_\_\_\_\_ Grades: \_\_\_\_\_

6. How many children have ever attended HCCA? \_\_\_\_\_

Names: \_\_\_\_\_ Years Attended: \_\_\_\_\_

7. Do you have any relatives (by marriage or blood) employed at HCCA? \_\_\_yes \_\_\_ no

If yes who and what position \_\_\_\_\_.

8. Are you a member of a local church? \_\_\_ yes \_\_\_ no

If so, which church? \_\_\_\_\_



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### II. Educational Background

Please list high school and colleges attended and diplomas or degrees earned

Name of Schools	Diploma/Degree Received	Year Received
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### III. Community Involvement

Please describe your current and prior community and civic involvement.

### IV. Related Experience and Information

1. What experience have you had that would help your understanding of issues affecting children and education?
  
  
  
  
  
  
  
  
  
  
2. How do you think private Christian education should differ from public education? From other private education?
  
  
  
  
  
  
  
  
  
  
3. What do you believe should be the top 3 priorities addressed by the HCCA Board of Directors in the coming year?



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4. Please describe your relationship with Jesus Christ.
  
  
  
  
  
5. What do you believe are the most critical long term issues facing Holy Cross Christian Academy, and how would you propose they be addressed?
  
  
  
  
  
6. What role should parents play in the education of their children?
  
  
  
  
  
7. What are the individual strengths you would bring to the Board of Directors?
  
  
  
  
  
8. What role should the Board of Directors play in the organizational structure of HCCA?
  
  
  
  
  
9. How much time do you have available to dedicate to the Board of Directors, serving on sub-committees and other various capacities throughout the term?



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### **Applicant Authorization and Consent for Release of Information**

All applicants who are under consideration for an appointment to the Board of Directors are subject to a criminal records check. The Board of Directors may, in its sole discretion, consider you conditionally pending satisfactory completion of the records check. If the records check is not satisfactory, or reveals that you have been convicted or pled guilty to certain criminal offenses, the Board will terminate consideration of your application.

I certify that information provided by me in connection with this application is true and accurate. I understand that any misrepresentation or omission of facts is sufficient cause to reject my application and cause my removal from the Board of Directors if selected.

I authorize the Board of Directors to verify, by references or otherwise, any information provided in this application. I authorize the companies, schools, and persons named in my application to provide information regarding me and hereby release them from all liability in connection with the release of this information.

I authorize the Board of Directors to perform a background check. I acknowledge and understand that any adverse information obtained in conducting background checks will be considered in the decision whether or not to nominate and/or appoint me and may be the basis for a decision not to nominate an/or appoint me.

I authorize any individual of entity to reveal to the Board of Directors, orally and/or in writing, the results of this verification process. I release the Board of Directors, and any individual or entity providing or receiving information regarding this application from any claims, damages, losses, liabilities, costs and expenses related to gathering and reporting information pursuant to this release and from any other charge or complaint related to obtaining and/or reporting any information pursuant to this release.

\_\_\_\_\_  
Name Printed

\_\_\_\_\_  
Signature

Date \_\_\_\_\_