



**Austin Independent School District  
Standard Application Form for Service on Campus Advisory Bodies (CACs)**

If you are completing this form electronically, please click on the gray text fields and type in text where requested, or click on the gray check boxes that are applicable and an "X" will appear. The form will expand as text is entered.

If you are completing this form by hand, please **print** all information.

For more information on CACs, including CAC bylaws: <http://www.austinisd.org/advisory-bodies/cac>

**Date:**

**Your Name:**

**Your Primary Residence**  
**Street Address:**  
**City:**  
**Zip Code:**

**Preferred Email Address:**

**Preferred Daytime Telephone Number:**

**Name of School (CAC on Which You Wish to Serve):**

The following CAC membership criteria apply:

- Parents must live within the district, and must be a custodial parent or guardian of a student currently enrolled in the school indicated above. Parents may not also be AISD employees.
- Community members must live within the district. Community members may not also be parents or AISD employees, and must be at least 18 years of age.
- Business representatives need not live or work within the district. Business representatives may also be parents.

**Based on the above criteria, please select one of the following CAC membership categories: (mark with an X)**

- I am a Parent
- I am a Community Member
- I am a Business Representative

**Please describe any current or previous school-related service (e.g., district-level committee, CAC, PTA, volunteer, tutor, mentor):**

**Please describe any other current or previous community service:**

AISD recognizes and supports the concept of balanced representation in regard to filling vacancies on district advisory bodies. To this end, every effort is made to appoint members who represent the diversity of our community. **Please provide the following information about yourself:**

**Gender:**  
**Ethnicity:**

**Please describe why you are interested in serving on the CAC you indicated:**

*Although not required, you are encouraged to attach written references to this form in support of your membership.*  
 I have attached the following number of written references to this form:

**Please acknowledge that you understand each of the following :**

- Submittal of this application does not in itself guarantee CAC membership, but my application will be considered
- The CAC meets at least eight times during the school year
- CAC membership is a two-year commitment (unless serving a partial term)
- If accepted, I am expected to comply with CAC bylaws, including reasonably regular attendance and member conduct
- The CAC is an advisory body, and the principal has ultimate decision-making authority for the campus

**PLEASE SUBMIT THIS COMPLETED FORM DIRECTLY TO THE CAMPUS OFFICE or share/ email to the principal:  
 zoila.cardenas @austinisd.org**



**Solicitud de membresía en el Consejo de Asesoría del Plantel**

La ley estatal (Texas Education Code, §11.251) requiere que los distritos escolares establezcan Consejos de Asesoría de Planteles (CACs). La misión del CAC es promover excelencia en la educación para todos los estudiantes mediante una representación de base muy amplia. Los CAC ofrecen una aportación valiosa al planeamiento y las operaciones del plantel.

*Sírvase darnos la siguiente información:*

**Plantel al que desea representar:**

**Su nombre:**

**Su dirección:**

**Su teléfono(s) durante el día:**

**Su dirección de e-mail:**

**Categoría de membresía aplicable (sírvase notar las restricciones estatutorias): (marcar con una X)**

Padre/madre de un niño(a) en el plantel antes especificado

*(no empleado de AISD)*

Representante de la comunidad

*(no empleado de AISD; no padre/madre de un niño(a) en escuela de AISD; al menos de 18 años de edad)*

Representante de negocios

*(no empleado de AISD)*

**Servicio al Distrito, actual o previo (sírvase marcar cualquiera de los siguientes que se aplique):**

Consejo de Asesoría de Plantel

PTA/PTO

Voluntario, tutor o mentor

Comité o Equipo especial, a nivel de Distrito

Otro (sírvase describirlo):

*Sírvase declarar brevemente por qué querría prestar servicio en el Consejo de Asesoría del Plantel (use el reverso de esta página si es necesario):*

*Tengo entendido que:*

- El CAC se reunirá al menos ocho veces durante el año escolar
- La membresía en el CAC es un compromiso por dos años (a menos que se esté cubriendo un término parcial)
- Se espera que yo haga cualquier esfuerzo razonable por asistir a las juntas del CAC
- El CAC es un grupo asesor, y el director tiene la autoridad para tomar la decisión final para el plantel.

**Su Firma:**

**Fecha:**

**Sírvase entregar esta forma completa a la oficina de su escuela o email la directora [zoila.cardenas@austinisd.org](mailto:zoila.cardenas@austinisd.org)**