



## MSCR CITIZEN'S ADVISORY COMMITTEE

Information Profile

Date \_\_\_\_\_

Name:

\_\_\_\_\_

Mailing Address:

\_\_\_\_\_

Telephone Number(s): Home \_\_\_\_\_ Work/Cell \_\_\_\_\_

Email Address: \_\_\_\_\_

Occupation: \_\_\_\_\_

1. Recreation/leisure interests:
  
2. Previous involvement with Madison School & Community Recreation Department as participant, parent paid or volunteer staff, etc. (if any):
  
3. Are you able to commit to a minimum of 6 evening meetings per year?  
Yes \_\_\_\_\_ No \_\_\_\_\_
4. Are you able to commit to attending at least one special event per year in the evening or on a weekend?  
Yes \_\_\_\_\_ No \_\_\_\_\_
5. Are you able to commit to serving on one subcommittee (1-2 meetings per year)?  
Yes \_\_\_\_\_ No \_\_\_\_\_
6. Please furnish a brief statement about your interest in serving on the MSCR Advisory Committee:

Check any that apply to you, including skills and expertise you have:

Financial management	
Administration	
Accounting	
Investments, Banking	
Fund raising (professional fund-raisers and/or those with leverage in raising money or soliciting sponsorships)	
Government representative/employee	
Law	
Marketing	
Strategic or Long Range Planning	
Public Relations	
Non-profit management	
Other:	
Age:	
From 25-35	
From 36-50	
From 51-64	
65+	
Gender:	
Male	
Female	
Race/Ethnic Background:	
Asian	
African American	
Caucasian	
Hispanic/Latino	
Bi-Racial/Multi-Racial	
Employment:	
Government employee	
Private business employee	
Self employed	
Retired	
Other	

Please return form immediately to Jacob Tissue, Director: MSCR, 3802 Regent Street, Madison, WI 53705, Fax: 608-204-0557 or email: [jd tissue@madison.k12.wi.us](mailto:jd tissue@madison.k12.wi.us)

Questions? Call 204-3015.