



# TLINGIT & HAIDA HEAD START

*Central Council Tlingit and Haida Indian Tribes of Alaska*

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## POLICY COUNCIL APPLICATION

Center: \_\_\_\_\_

**I am applying for:** \_\_\_\_\_ **Representative**                      \_\_\_\_\_ **Alternate**

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone (H): \_\_\_\_\_ (W): \_\_\_\_\_

Message/cell: \_\_\_\_\_ Fax: \_\_\_\_\_

Email \_\_\_\_\_

What interested you in becoming a Policy Council member? How do you feel about the position?

What policies or issues would you like to see changed or developed?

Have you ever served on the Tlingit & Haida Head Start Policy Council? (If yes please give years served.)

\_\_\_\_\_  
\_\_\_\_\_

My family is currently enrolled with the Tlingit & Haida Head Start program this year.

Yes                      No  
(Circle one)

Do you currently have any relatives (as stated in 1998 Tlingit & Haida performance standards for "immediate family" to be father, mother, husband, wife, son, daughter, brother, sister, grandparent, and grandchild) working for Tlingit & Haida?

Name of relative	Position	How related
_____	_____	_____
_____	_____	_____
_____	_____	_____

\_\_\_\_\_ I am aware of the conflict of interest involving family members working for Tlingit & Haida and my being elected to Policy Council and I will inform the Policy Council should any of my family be hired for any position with Tlingit & Haida.

I am committed to and take responsibility for my Policy Council position.

\_\_\_\_\_ I understand that taking this position means that I must be willing to travel

\_\_\_\_\_ I understand that I will attend or have my alternate attend all Policy Council meetings.

\_\_\_\_\_ I will discuss all major issues with my staff and parents prior to voting for my center

\_\_\_\_\_ I understand that some issues that will be discussed at the Policy Council level are sensitive and should be kept in confidence. I have signed the confidentiality form and understand the consequences of breaching confidentiality.

\_\_\_\_\_ I understand that if I resign prior to the ending of my elected term that it is my responsibility to find my replacement before my effective date of resignation.

\_\_\_\_\_ I will hold a local parent training for my center upon my return from the face-to-face meeting/training.

\_\_\_\_\_  
Parent Representative or Alternate

\_\_\_\_\_  
Local Chairperson

\_\_\_\_\_  
Lead Teacher