

**SCHOOLSITE COUNCIL (SSC)**

**Election Materials**

SACRAMENTO CITY UNIFIED SCHOOL DISTRICT

**School Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**COMMITTEE MEMBERS NEEDED**

**SCHOOL SITE COUNCIL (SSC)**

*(Insert school name here)* is in the process of accepting nominations for our School Site Council (SSC) Committee. The SSC is an elected body composed of the principal, teachers, other school personnel, parents, and (at the secondary level) students.

# RESPONSIBILITIES/DUTIES OF THE SCHOOL SITE COUNCIL MEMBERS:

* Annual work as a team with other advisory group representatives to review and revise the Single Plan for Student Achievement (SPSA) for our school consistent with Sacramento City Unified School Governing Board’s Strategic Plan, approved LCAP and LEA Plan.
* Annually review and revise proposed expenditures of supplementary funds utilized through the SPSA.
* Recommend the SPSA to the local governing board for approval.
* Monitor implementation of the SPSA through the school year.
* Evaluate the effectiveness of the SPSA each spring.
* Regularly attend all scheduled SSC meetings.
* Assist in coordination of the SSC election process.

## APPLICATION FOR MEMBERSHIP AND CONSENT

###### If you are interested in serving on the School Site Council, please complete the attached APPLICATION FOR SCHOOL SITE COUNCIL COMMITTEE ELECTION form and return it to:

###### \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Ballots will be mailed home to all parents on: \_\_\_\_\_\_\_\_\_\_\_\_.

Final election date will be: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Election outcome will be announced on: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Questions? Please call: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# SACRAMENTO CITY UNIFIED SCHOOL DISTRICT

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

###### APPLICATION FOR SCHOOL SITE COUNCIL COMMITTEE ELECTION

# SCHOOL SITE COUNCIL

# PARENT REPRESENTATIVES

I would like to be a member of the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_School Site Council.

*(insert school name*)

Please list your children attending this school:

Student’s Name Grade

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

**I give permission for my name to appear on the ballot.**

**(NOTE: Your name will only will appear on ballot. Your address/phone number will not appear on the ballot.)**

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (print name)

**(For school office use only)**

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: (home) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (work) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please return this form to the school office by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(date)

Ballots will be mailed on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

(date)

Thank you for supporting our school.

**SACRAMENTO CITY UNIFIED SCHOOL DISTRICT**

(Insert School Name)

### SCHOOL SITE COUNCIL BALLOT

**□ Teacher □ Parent □ Other □ Write In**

## Please Vote for (#) Candidates

|  |  |
| --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name of Candidate  Grade level of student(s) | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name of Candidate  Grade level of student(s) |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name of Candidate  Grade level of student(s) | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name of Candidate  Grade level of student(s) |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name of Candidate  Grade level of student(s) | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name of Candidate  Grade level of student(s) |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name of Candidate  Grade level of student(s) | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name of Candidate  Grade level of student(s) |

Submit ballot to the school office by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

✀ -------------------------------------------------------------------------------------------------------

### SACRAMENTO CITY UNIFIED SCHOOL DISTRICT

(Insert School Name)

### SCHOOL SITE COUNCIL BALLOT

**□ Teacher □ Parent □ Other □ Write In**

## Please Vote for (#) Candidates

|  |  |
| --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name of Candidate  Grade level of student(s) | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name of Candidate  Grade level of student(s) |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name of Candidate  Grade level of student(s) | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name of Candidate  Grade level of student(s) |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name of Candidate  Grade level of student(s) | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name of Candidate  Grade level of student(s) |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name of Candidate  Grade level of student(s) | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name of Candidate  Grade level of student(s) |

Submit ballot to the school office by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SACRAMENTO CITY UNIFIED SCHOOL DISTRICT

(Name of School)

### SCHOOL SITE COUNCIL

### Parent/Staff Election Checklist

**Enter date completed. Maintain documentation for CDE Review**

\_\_\_\_\_\_\_\_ 1.Letter to parents entitled “COMMITTEE MEMBERS NEEDED”

with attachment “APPLICATION FOR MEMBERSHIP AND CONSENT”formsent home to parents at the beginning of the school year.

\_\_\_\_\_\_\_\_ 2. Ballots prepared based on the forms submitted by interested

parents.

\_\_\_\_\_\_\_\_ 3. Ballots mailed (email, backpack distribution) out to parents with request to return by a

specified date.

\_\_\_\_\_\_\_\_ 4. Ballots tabulated and election results publicized. Ballots and

election results must be maintained on file at the school site for minimum of 5 years.

\_\_\_\_\_\_\_\_ 5. Develop a published SSC Membership roster

\_\_\_\_\_\_\_\_ 6. Staff was provided an opportunity to select/elect SSC members. Ballots or staff meeting minutes is on file and election outcomes have been publicized. Ballots or minutes reflecting the process and outcome of an election must be maintained for review.

I certify that the above School Site Council Election Procedures were implemented as indicated above.

Principal’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Principal’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_