



# SACRAMENTO CITY UNIFIED SCHOOL DISTRICT BOARD OF EDUCATION

Agenda Item# 13.1n

**Meeting Date:** June 6, 2024

**Subject:** Approval of CIF Form to Record District and/or School Representatives to Leagues

- Information Item Only
- Approval on Consent Agenda
- Conference (for discussion only)
- Conference/First Reading (Action Anticipated: \_\_\_\_\_)
- Conference/Action
- Action
- Public Hearing

**Division:** Access and Equity

**Recommendation:** Approval of CIF Form to Record District and/or School Representatives to Leagues. The principal and athletic director from each comprehensive high school are on the list to be approved.

**Background/Rationale:** See attached cover letter from CIF Executive Director

**Financial Considerations:** None

**LCAP Goal(s):**

**Documents Attached:**

1. Letter from CIF President
2. 2024-2025 Designation of CIF Representatives to League Form

**Estimated Time of Presentation:** N/A

**Submitted by:** David Parsh, Coordinator, District Athletics

**Approved by:** Lisa Allen, Superintendent



TO: SUPERINTENDENT OF PUBLIC SCHOOLS  
PRINCIPAL OF PRIVATE SCHOOLS

FROM: RON NOCETTI, EXECUTIVE DIRECTOR

RE: FORM TO RECORD DISTRICT AND/OR SCHOOL REPRESENTATIVES TO LEAGUES

DATE: March 18, 2024

Enclosed is a form upon which to record your district and/or school representatives to leagues for **next year, 2024-2025**. It is a form sent every year to you in order to obtain the names of league representatives to every league in the state and to make sure that the league representatives are designated by school district or school governing boards. **It is a legal requirement that league representatives be so designated.**

The education code gives the authority for high school athletics to high school governing boards. The code also requires that the boards, after joining CIF, designate their representatives to CIF leagues. This is a necessity! (Ed. Code 33353 (a) (1))

We are asking that, after action by the governing board, you **send the names of league representatives to your CIF Section office**. Obviously, the presumption behind this code section is that the representatives of boards are the only people who will be voting on issues, at the league and section level, that impact athletics.

If a governing board does not take appropriate action to designate representatives or this information is not given to Section offices within the required time frame, CIF is required to suspend voting privileges (CIF Constitution, Article 2, Section 25, p. 18) for the affected schools.

At the State Federated Council level, we will be asking that Sections verify that their representatives are designated in compliance with this Ed. Code section.

I hope this gives you a bit of background. Thank you for all you do to help support high school athletics. It is a valuable program in all high schools, and we appreciate the support you give to the program and to CIF.

**Please return the enclosed form no later than June 28, 2024, directly to your CIF Section Office.**

**2024-2025 Designation of CIF Representatives to League**

Please complete the form below for each school under your jurisdiction and **RETURN TO THE CIF SECTION OFFICE no later than June 28, 2024.**

SACRAMENTO CITY UNIFIED School District/Governing Board at its 6/6/24 meeting,  
(Name of school district/governing board) (Date)

appointed the following individual(s) to serve for the 2024-2025 school year as the school's league representative:

**PHOTOCOPY THIS FORM TO LIST ADDITIONAL SCHOOL REPRESENTATIVES**

NAME OF SCHOOL CK McCLATCHY  
NAME OF REPRESENTATIVE ANDREA EGAN POSITION PRINCIPAL  
ADDRESS 3066 FREEMONT BLVD CITY SACRAMENTO ZIP 95818  
PHONE 916 395-5050 FAX 916 264-4400 E-MAIL andrea-egan@scusd.edu

NAME OF SCHOOL HIRAM JOHNSON  
NAME OF REPRESENTATIVE GARRETT KIRKLAND POSITION PRINCIPAL  
ADDRESS 6879 14TH AVE CITY SACRAMENTO ZIP 95820  
PHONE 916 395-5070 FAX 916-277-6307 E-MAIL garrett-kirkland@scusd.edu

NAME OF SCHOOL LUTHER BURBANK  
NAME OF REPRESENTATIVE JIM PETERSON POSITION PRINCIPAL  
ADDRESS 3500 FLORIN RD CITY SACRAMENTO ZIP 95823  
PHONE 916-395-5110 FAX 916-433-5199 E-MAIL jim-peterson@scusd.edu

NAME OF SCHOOL JOHN F KENNEDY  
NAME OF REPRESENTATIVE REGINALD BROWN POSITION PRINCIPAL  
ADDRESS 6715 GLORIA DR CITY SACRAMENTO ZIP 95831  
PHONE 916-395-5090 FAX 916-433-5511 E-MAIL reginald-brown@scusd.edu

If the designated representative is not available for a given league meeting, an alternate designee of the district governing board may be sent in his/her place. **NOTE:** League representatives from public schools and private schools must be designated representatives of the school's governing boards in order to be eligible to serve on the section and state governance bodies.

Superintendent's or Principal's Name Lisa Allen Signature [Signature]  
Address 5735 47th Avenue City Sacramento Zip 95824  
Phone 916 643 9010 FAX \_\_\_\_\_

**PLEASE RETURN THIS FORM DIRECTLY TO THE CIF SECTION OFFICE.**

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**PHOTOCOPY THIS FORM TO LIST ADDITIONAL SCHOOL REPRESENTATIVES**


NAME OF SCHOOL ROSEMONT  
NAME OF REPRESENTATIVE MITCHELL JONES POSITION PRINCIPAL  
ADDRESS 9594 KIEFER BLVD CITY SACRAMENTO ZIP 95827  
PHONE 916-395-5130 FAX 916-228-5743 E-MAIL mitchell-jones@scusd.edu  
\*\*\*\*\*

NAME OF SCHOOL WEST CAMPUS  
NAME OF REPRESENTATIVE JOHN MCMEEKIN POSITION PRINCIPAL  
ADDRESS 5022 58th ST CITY SACRAMENTO ZIP 95820  
PHONE \_\_\_\_\_ FAX \_\_\_\_\_ E-MAIL john-mcmeekin@scusd.edu  
\*\*\*\*\*

NAME OF SCHOOL \_\_\_\_\_  
NAME OF REPRESENTATIVE \_\_\_\_\_ POSITION \_\_\_\_\_  
ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_  
PHONE \_\_\_\_\_ FAX \_\_\_\_\_ E-MAIL \_\_\_\_\_  
\*\*\*\*\*

NAME OF SCHOOL \_\_\_\_\_  
NAME OF REPRESENTATIVE \_\_\_\_\_ POSITION \_\_\_\_\_  
ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_  
PHONE \_\_\_\_\_ FAX \_\_\_\_\_ E-MAIL \_\_\_\_\_

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Superintendent's or Principal's Name Lisa Allen Signature   
Address 5735 47th Avenue City Sacramento Zip 95824  
Phone 916.643.9010 FAX \_\_\_\_\_

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 NAME OF REPRESENTATIVE ROB FEICKERT POSITION ATHLETIC DIRECTOR  
 ADDRESS 3066 FREEPORT BLVD CITY SACRAMENTO ZIP 95818  
 PHONE 916 395-5050 FAX 916 264-4400 E-MAIL rob-feickert@scusd.edu

NAME OF SCHOOL HIRAM JOHNSON  
 NAME OF REPRESENTATIVE NATHAN-OLTMANN POSITION ATHLETIC DIRECTOR  
 ADDRESS 6879 14TH AVE CITY SACRAMENTO ZIP 95820  
 PHONE 916 395-5070 FAX 916-277-6307 E-MAIL nathan-oltmanns@scusd.edu

NAME OF SCHOOL LUTHER BURBANK  
 NAME OF REPRESENTATIVE SANDRA ESCALERA POSITION ATHLETIC DIRECTOR  
 ADDRESS 3500 FLORIN RD CITY SACRAMENTO ZIP 95823  
 PHONE 916-395-5110 FAX 916-433-5199 E-MAIL sandra-escalera@scusd.edu

NAME OF SCHOOL JOHN F KENNEDY  
 NAME OF REPRESENTATIVE JASON HETZLER POSITION ATHLETIC DIRECTOR  
 ADDRESS 6715 GLORIA DR CITY SACRAMENTO ZIP 95831  
 PHONE 916-395-5090 FAX 916-433-5511 E-MAIL jason-hetzler@scusd.edu

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NAME OF REPRESENTATIVE CHRIS GOSNEY POSITION ATHLETIC DIRECTOR  
ADDRESS 9594 KIEFER BLVD CITY SACRAMENTO ZIP 95827  
PHONE 916-395-5130 FAX 916-228-5743 E-MAIL chris-gosney@scvsd.edu

\*\*\*\*\*  
NAME OF SCHOOL WEST CAMPUS  
NAME OF REPRESENTATIVE MARY LUCCA POSITION ATHLETIC DIRECTOR  
ADDRESS 5022 58th ST CITY SACRAMENTO ZIP 95820  
PHONE \_\_\_\_\_ FAX \_\_\_\_\_ E-MAIL mary-lucca@scvsd.edu

\*\*\*\*\*  
NAME OF SCHOOL \_\_\_\_\_  
NAME OF REPRESENTATIVE \_\_\_\_\_ POSITION \_\_\_\_\_  
ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_  
PHONE \_\_\_\_\_ FAX \_\_\_\_\_ E-MAIL \_\_\_\_\_

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