



Universal Pre-Kindergarten

### UPK Parent Advisory Committee Nomination Form

<b>System Name</b> (School District, Agency Name, etc) : Click or tap here to enter text.		
<b>UPK Site:</b> Click or tap here to enter text.		
<b>Nomination Requirements:</b>	<b>YES</b>	<b>NO</b>
Nominee is a current member of the UPK Action Team for Partnership		
Nominee agrees to represent the UPK site on the UPK Parent Advisory Committee		
Nominee will commit to participation in four virtual meetings		
<b>Please describe any special accommodations required/requested:</b> Click or tap here to enter text.		

<b>Nominee Contact Information:</b>	
First Name: Click or tap here to enter text.	Last Name: Click or tap here to enter text.
Phone: Click or tap here to enter text.	E-mail:
Address: Click or tap here to enter text.	
City, St., Zip: Click or tap here to enter text.	

Complete and return to [alyssa.swiatek@jfs.ohio.gov](mailto:alyssa.swiatek@jfs.ohio.gov)

