REPLY FORM

Please fax the following information to CSBA at (916) 669-3277 as soon as your board adopts the Professional Governance Standards. If possible, please attach a copy of the board resolution amd/or a copy of the board bylaws.

The	_ School District/County Board of Education
formally adopted the Professional	Governance Standards at its meeting
on	
	to receive future information and supporting materials
for the Professional Governance St	candards:
Board President	
Board Fresident	
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Name of contact person (if differen	nt from Board President):
mul	
Title:	
Address:	
City:	County:
State:	Zip:
Telephone:	Fax:
-	
E-mail:	

Please return completed form to:

Dan B. Walden

Director, Governance Consulting Services California School Boards Association 3100 Beacon Boulevard West Sacramento, CA 95691 BUS: (916) 669-3279

FAX: (916) 669-3277