

**ETHICS PANEL APPLICATION**

A digital copy of this form is available at [www.kent.k12.md.us/Forms.aspx](https://www.kent.k12.md.us/Forms.aspx). It can be filled out by hand or on a computer using Microsoft Word or another compatible word processing app; please do not use Google Docs.

|  |  |
| --- | --- |
| Name: |  |
|  | *First* | *M.I.* | *Last* |
| Address: |  |
|  | *Street Address* | *Apt./Unit #* |
|  |  |
|  | *City* | *State* | *ZIP Code* |

|  |  |  |  |
| --- | --- | --- | --- |
| Gender: |  | Race/Ethnicity: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Home Phone: |  | Work Phone: |  |
| Email: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Occupation: |  | Employer: |  |

Please check all that apply:

[ ]  I am an employee of Kent County Public Schools.

[ ]  I have a spouse that works for Kent County Public Schools.

[ ]  I am employed by a business entity that is subject to the authority of the Board of Education.

[ ]  I am a registered lobbyist for the State.

|  |  |
| --- | --- |
| Business entities I represent: |  |

[ ]  I am a bona fide resident of Kent County. (Evidence of residency may be required.)

|  |  |
| --- | --- |
| Years living in Kent County: |  |

|  |
| --- |
| Please describe your interest in serving on the Ethics Panel. |
|  |

|  |  |
| --- | --- |
| Name: |  |

|  |
| --- |
| What unique perspectives will you bring to the Ethics Panel? |
|  |

|  |  |  |  |
| --- | --- | --- | --- |
| Applicant's Signature: |  | Date: |  |

**Please return this form to:**

Gail Manley, Executive Assistant to the Superintendent

Kent County Board of Education

5608 Boundary Ave.

Rock Hall, MD 21661

Fax: 410-778-6193

Email: gmanley@kent.k12.md.us

*Form Revised: 4/30/2025*