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MAY - 1 2017

Superintendent's Office
Santa Rosa City Schools

TO: SUPERINTENDENT OF PUBLIC SCHOOLS
PRINCIPAL OF PRIVATE SCHOOLS

FROM: ROGER L. BLAKE

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

DATE: APRIL 21, 2017

Enclosed is a form upon which to record your district and/or school representatives to leagues for **next year, 2017-2018**. 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.17) 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 30, 2017 directly to your CIF Section Office. Addresses of each section are listed on the back of the form. Please contact us if we can give you further information.

2017-2018 Designation of CIF Representatives to League

Please complete the form below for each school under your jurisdiction and **RETURN TO THE CIF SECTION OFFICE (ADDRESSES ON REVERSE SIDE)** no later than June 30, 2017.

Santa Rosa City Schools School District/Governing Board at its May 10, 2017 meeting,
(Name of school district/governing board) (Date)
appointed the following individual(s) to serve for the 2017-2018 school year as the school's league representative:

PHOTOCOPY THIS FORM TO LIST ADDITIONAL SCHOOL REPRESENTATIVES

NAME OF SCHOOL Elsie Allen High School
NAME OF REPRESENTATIVE Principal, Assistant Principal, AD POSITION
ADDRESS 599 Bellevue Avenue CITY Santa Rosa ZIP 95407
PHONE 707-528-5021 FAX 707-528-5023 E-MAIL coachpeterich@sbcglobal.net

NAME OF SCHOOL Maria Carrillo High School
NAME OF REPRESENTATIVE Principal, Assistant Principal, AD POSITION
ADDRESS 6975 Montecito Boulevard CITY Santa Rosa ZIP 95409
PHONE 707-528-5785 FAX 707-528-5789 E-MAIL coachpeterich@sbcglobal.net

NAME OF SCHOOL Montgomery High School
NAME OF REPRESENTATIVE Principal, Assistant Principal, AD POSITION
ADDRESS 1250 Hahman Drive CITY Santa Rosa ZIP 95405
PHONE 707-528-5512 FAX 707-528-5056 E-MAIL coachpeterich@sbcglobal.net

NAME OF SCHOOL Piner High School
NAME OF REPRESENTATIVE Principal, Assistant Principal, AD POSITION
ADDRESS 1700 Fulton Road CITY Santa Rosa ZIP 95403
PHONE 707-528-5356 FAX 707-528-5246 E-MAIL coachpeterich@sbcglobal.net

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 Diann Kitamura Signature _____
Address 211 Ridgway Avenue City Santa Rosa Zip 95401
Phone 707-528-5181 Fax 707-528-5440

**PLEASE MAIL OR FAX THIS FORM DIRECTLY TO THE CIF SECTION OFFICE.
SEE REVERSE SIDE FOR CIF SECTION OFFICE ADDRESSES.**

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NAME OF SCHOOL Santa Rosa High School
NAME OF REPRESENTATIVE Principal, Assistant Principal, AD POSITION
ADDRESS 1235 Mendocino Avenue CITY Santa Rosa ZIP 95401
PHONE 707-528-5292 FAX 707-528-5724 E-MAIL coachpeterich@sbcglobal.net

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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NAME OF REPRESENTATIVE _____ POSITION _____
ADDRESS _____ CITY _____ ZIP _____
PHONE _____ FAX _____ E-MAIL _____

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