

# **APPLICATION FOR SCHOOL HEALTH ADVISORY COUNCIL**

I WISH TO BE CONSIDERED FOR AN **APPOINTMENT**  
TO A POSITION ON THE SHAC

Name: Erin Gwilliam

Address: 2802 E 17<sup>th</sup> St, Odessa Tx 79761

Spouse's Name: Brian

Occupation: Homemaker

Home Phone: 432-362-9410

Business Phone: 432-210-4981

Email Address: egwilliam@hotmail.com

Race or Ethnic Group: Caucasian

Children (if any) in ECISD: Brinley 10<sup>th</sup> @ PHS, Parker 8<sup>th</sup> @ Nimitz, Tanner 6<sup>th</sup> @ Nimitz, Aubrey 4<sup>th</sup> @ Reagan

Is your spouse or any family member related to a member of the ECISD Board of Trustees? No

**Are you a resident of Ector County?** Yes

***Resume to be attached***

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***Please mail to:***

***Ector County ISD  
Attn: Michael Neiman  
P.O. Box 3912  
Odessa, Texas 79760***

***Email to:***

***michael.neiman@ectorcountyisd.org***