



0167.3

Portage Township School Corporation
Office of the Board of School Trustees

PUBLIC COMMENT FORM

Name: _____

Address: _____

City/State/Zip: _____

Email Address: _____

Home Phone Number: _____ Daytime Phone Number: _____

I am a resident of Portage Township School District: Yes _____ No _____

I am an Employee of the Portage Township School District Yes _____ No _____

I am an official representative of the following organization: _____

Persons wishing to address the Board are asked to observe the following procedures: (a) obtain recognition from the presiding officer; (b) stand and identify themselves; (c) address all remarks to the Board in accordance with Board Policy 167.3. Speakers will be provided three minutes to discuss their topic with this Board.

I understand that inappropriate or irrelevant remarks shall be ruled "out of order" and that matters that are currently under negotiation or litigation, or related to personnel will not be discussed at the public meeting of the PTS Board of School Trustees. Personal attacks will not be permitted. Any speaker continuing with such remarks shall be required to relinquish the floor.

Signature: _____

1/28/2013