

# California Interscholastic Federation

Marie Ishida, Executive Director **STATE OFFICE** 1320 Harbor Bay Parkway, Suite 140, Alameda, CA 94502 Tel: (510) 521-4447 Fax: (510) 521-4449

### 2010-2011 Designation of CIF Representatives to League

Please complete the form below for each school under your jurisdiction and return to the CIF SECTION OFFICE (ADDRESS ON REVERSE SIDE) no later than July 1, 2010.

Mt.Diablo Unified School District/Governing Board at its \_\_\_\_\_ June 22, 2010 meeting, (name of school district/governing board) (date)

appointed the following individual(s) to serve for the 2010-2011 school year as the school's league representative: Representatives can be identified by position. It is unnecessary to update this form during the school year, should there be a change if representative is identified by position.

#### PHOTOCOPY THIS FORM TO LIST ADDITIONAL SCHOOL REPRESENTATIVES

NAME OF SCHOOL	Clayto	n Valley HS			
NAME OF REPRESENTATIVE			POSITION Principal,	V.P. or A.D.	
ADDRESS 1101 Alberta Way			CITY Concord ZIP	94521	
PHONE 925-682-7474	FAX	925-825-7859	E-MAIL		
NAME OF SCHOOL	Collag				
	Colleg	e raik ns			
NAME OF REPRESENTATIVE			POSITION Principal, V.P. or A.D.		
ADDRESS 201 Viking Dr.			CITY Pleasant Hill	ZIP 94523	
PHONE 925-582-7670	FAX 9	925 676 7892	E-MAIL		
NAME OF SCHOOL					
NAME OF REPRESENTATIVE			POSITION Principal,	POSITION Principal, V.P. or A.D.	
ADDRESS 4200 Concord Blvd.			CITY Concord	ZIP 94521	
PHONE 925-687-2030	FAX 9	925-682-4613	E-MAIL	<u> </u>	
NAME OF SCHOOL	Mt. Di	ablo HS			
NAME OF REPRESENTATIVE			POSITION Principal, V.P. or A.D.		
ADDRESS 2450 Grant St.			CITY Concord	ZIP 94520	
PHONE 925-682-4030	FAX	925-687-9658	E-MAIL		
NAME OF SCHOOL	Norths	gate HS			
NAME OF REPRESENTATIVE			POSITION Principal,	V.P. or A.D.	
ADDRESS 2450 Grant St.			CITY Concord	ZIP 94520	
PHONE 925-938-0900	FAX	925-945-6429	E-MAIL		
NAME OF SCHOOL	Ygnac	io Valley HS			
NAME OF REPRESENTATIVE			POSITION Principal,	V.P. or A.D.	

ADDRESS 755 Oak Grove Rd.			CITY Concord ZII	P 94518			
PHONE 925-685-8414	FAX	925-685-1435	E-MAIL				
If the designated representative is not available for a given <u>league</u> meeting, an alternate designee of the district governing board may be sent in his/her place. <b>NOTE:</b> 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 Name (print) Steven Lawrence	<u>ce_</u> Superintendent's Signa	ture	
Address Mt. Diablo Unified, 1936 Carlotta Dr.	City Concord	Zip 94521	
Phone 925-682-8000	Fax	925-689-1649	

## PLEASE MAIL OR FAX THIS FORM DIRECTLY TO THE CIF SECTION:

North Coast Section 12925 Alcosta Blvde., Suite 8 San Ramon, CA 94583 Fax: 925-866-7100