

INSTRUCTIONS ON REVERSE SIDE

RECALL PETITION

We, the undersigned, registered and qualified voters of the City of Washtenaw, in the County of Washtenaw, and State of Michigan, petition for the

calling of an election to recall Pamela J. Horisny from the office of Washtenaw Community College Board of Trustees for the following reason(s):

On 1-25-11 I spoke at the WCC board meeting and informed the board of my experience with the process used to measure learning outcomes. Based on this experience I concluded that the measurement of learning outcomes is gamed to the end of generating reports that support the master syllabi but these reports are a poor representation of what students actually learn. Chair Horisny has neglected to address the issues I raised, which are crucial to ensuring that students are getting the education they are paying for. Additionally, these issues, which she has neglected to address, are essential to the accreditation process.

In an e-mail dated 10-21-10 Chair Horisny was informed of feedback I received from a constituent who is involved in the U of M nursing program who stated that 'we found that WCC students just don't measure up in some respects.' In the 4-26-11 board meeting the board was informed that the UM School of Nursing has canceled the 'Nursing Transfer' program. Chair Horisny has neglected to inquire into the academic issues brought to her both before and after this program cancellation. Her neglect has resulted in degradation of academic quality at the College and cancellation of this program.

FOR CLERK'S USE ONLY

WARNING—A PERSON WHO KNOWINGLY SIGNS A RECALL PETITION MORE THAN ONCE OR SIGNS A NAME OTHER THAN HIS OR HER OWN IS VIOLATING THE PROVISIONS OF THE MICHIGAN ELECTION LAW.

✓	SIGNATURE	PRINTED NAME	STREET ADDRESS OR RURAL ROUTE	ZIP CODE	DATE OF SIGNING		
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FILED
 WASHTENAW COUNTY, MI
 2011 JUL 26 P 1:14
 CLERK OF SUPERIOR COURT
 COUNTY CLERK/REGISTER

CERTIFICATE OF CIRCULATOR

The undersigned circulator of the above petition asserts that he or she is a qualified and registered elector of the electoral district of the official whose recall is sought; that each signature on the petition was signed in his or her presence and was not obtained through fraud, deceit or misrepresentation; and that he or she neither caused nor permitted a person to sign the petition more than once and has no knowledge of a person signing the petition more than once. The undersigned circulator of the above petition further asserts that to his or her best knowledge, information and belief each signature is the genuine signature of the person purporting to sign the petition; the person signing the petition was at the time of signing a qualified registered elector of the City or Township listed in the heading of the petition; and the elector was qualified to sign the petition.

WARNING—A CIRCULATOR KNOWINGLY MAKING A FALSE STATEMENT IN THE ABOVE CERTIFICATE, A PERSON NOT A CIRCULATOR WHO SIGNS AS A CIRCULATOR, OR A PERSON WHO SIGNS A NAME OTHER THAN HIS OR HER OWN AS CIRCULATOR IS GUILTY OF A MISDEMEANOR.

CIRCULATOR – DO NOT SIGN OR DATE CERTIFICATE UNTIL AFTER CIRCULATING PETITION.

_____/_____/_____
 (Signature of Circulator) (Date)

 (Printed Name of Circulator)

 (City or Township Where Registered)

 Complete Residence Address (Street and Number or Rural Route) (Zip Code)