



**APPLICATION FOR RECALL PETITION SERIAL NUMBER**

The undersigned intends to circulate and file a recall petition demanding the recall of Governing Board Member:

Jon Aitken

(Governing Board Member Name)

of Vail Unified School District #20

(School District Name and Number)

The grounds of the recall are as follows: (state in not more than 200 words the grounds of the demand)

The VUSD community is demanding the recall of Jon Aitken due to his disregard for the VUSD parents, teachers, staff and especially the students. Under his leadership, the mental, emotional and physical health of the Vail students has steadily declined to an alarming level. Parents have repeatedly brought to his attention the increase in depression, loneliness, and number of suicides, which he has ignored. The students, parents, and staff do not feel like they have a voice before the board and feel silenced and disrespected. When voicing concerns about students at the board meetings, he displays a demeanor of disdain for the very people he is supposed to represent by leaning back in his chair, looking at the ceiling, and rolling his eyes. He made promises with specific timeframes about bringing items to vote and has failed to keep those promises. Furthermore he will not put items on the agenda when requested and will not bring them to a vote. The community has lost confidence in Jon Aitken to represent them, and demands his immediate recall.

I hereby make application for the issuance of an official serial number. I understand serial number must be affixed to the lower right-hand corner on each side of each petition sheet.

Carrie M. Liebich

Signature of Applicant

Carrie Liebich

Printed Name of Applicant

2660 E Darlene Ln

Applicant Address

Vail AZ 85641

Applicant City State Zip

(907) 602-2419

Applicant Phone Number

\_\_\_\_\_  
Name of Organization (if any)

\_\_\_\_\_  
Organization Address

\_\_\_\_\_  
Organization City State Zip

\_\_\_\_\_  
Organization Phone Number

\_\_\_\_\_  
Organization Officer Name and Title

\_\_\_\_\_  
Organization Officer Address

\_\_\_\_\_  
Organization Officer Name and Title

\_\_\_\_\_  
Organization Officer Phone Number

**Date of Application** 4/30/2021

**Signatures Required** 4,364

**Deadline for Filing** 8/28/2021

**Serial Number** R43021

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