



Board Member Application

TO THE BOARD OF DIRECTORS OF THE AGENCY:

I hereby apply for a vacated seat on the agency Board of Directors.

Type of print full name: _____

Disability: Yes ___ No ___ Husband's or wife's name: _____

Residence Address: _____

How long at address: _____ Telephone: _____

Business Address: _____ Telephone: _____

Nature of business and with whom connected:

How long a resident of the agency's service area: _____

Memberships in other organizations:

Name	Street	City	State
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Known by the following board members of this agency:

Brief biography: _____

Signature of Applicant: _____ Date: _____