

**Board Member Application**  
Position 1: Term Expires June 30, 2025

Applicant Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Are you a resident of Coos County? \_\_\_\_\_ Are you a registered voter? \_\_\_\_\_

Why do you want to serve on the (District Name) Board?

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Describe past experiences or positions held that would assist you as a board member.

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Outline strengths, abilities and talents that you would bring to the board.

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In your opinion, what is the most important role of a board member?

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**\*\*Attach additional sheets if needed\*\***

If appointed, would you be able to serve the entire term? \_\_\_\_\_

Please submit your application to: [mmez@scbec.org](mailto:mmez@scbec.org)

**Application Deadline: January 5, 2024 5PM**