

**Lower Umpqua Library District
Board Member Application**

Date: _____

Name: _____

Mailing Address: _____

Street Address if different: _____

Email: _____ **Phone:** _____

1. (a) Do you reside within the Lower Umpqua Library District? _____
(b) Are you registered to vote in the Lower Umpqua Library District? _____

2. Number of years you have lived in the area? _____

3. Would you be able to attend **at least 2** evening meetings per month? _____

4. Are you aware board members contribute considerable time developing and maintaining the Lower Umpqua Library District? _____

5. Can you foresee any potential conflict of interest that would prevent you from making impartial decisions? _____

If yes, please explain: _____

6. Would you be willing to attend out-of-town classes, meetings, and events? _____

7. What is your occupation? _____

8. What if any, library related experience do you have? _____

9. Please give a brief statement explaining why you desire to participate on the library board of directors. _____

10. Give a brief statement as to why you should be appointed to the Lower Umpqua Library District Board of Directors. _____

11. What qualifications do you possess that would benefit the Lower Umpqua Library District? _____

_____ →

12. Please list 3 references (include phone numbers)
