BOARD OF TRUSTEES APPLICATION FOR NOMINATION

PERSONAL DATA (PLEASE PRINT)



Instructions: Please type or print your answers in ink. Where a questions does not apply, answer "none" or "N/A". Please attach acopy of your resume, if available. **Return to**: *Cecil County Public Library*, 485 Mauldin Avenue, North East, Maryland 21901 Attn: Liz Booye, Executive Assistant via e-mail: LBooye@CecilCountyLibrary.org. If you have questions, you may call Liz at: 410 -996-1055 ext.1122.

NAME		
HOME PHONE	CELL PHONE	EMAIL ADDRESS
PRESENT HOME ADDRESS-STREET,	CITY, STATE, ZIP CODE	
PREVIOUS HOME ADDRESS-STREET,	, CITY, STATE, ZIP CODE (If at current addre	ess less than 5 years, please list all additional addresses below.)
HOW LONG HAVE YOU BEEN A RESI	DENT OF CECIL COUNTY?	
AND SHAPE AND SHAPE DESIRATION OF	TOWN TO VIOLEN BY WATER WOULD A DIT TOWN TO	O LAWRENCE A PERFECUENCE AND A PROPERTY DAY DIVIDENCE OF GO
ARE THRE ANY TIME RESTRICTIONS PLEASE EXPLAIN.	3 THAT WOULD LIMIT YOUR ABILITY 19	O ATTEND MEETINGS AND LIBRARY FUNCTIONS? IF SO,
ASSOCIATIONS/EXPERIENC	Œ	
WHAT IS YOUR PROFESSION AND/OF	R FOCUS OF INTEREST?	
NAME GROUPS OR ORGANIZATIONS	WHICH YOU HAVE BEEN OR ARE CURR	RENTLY ASSOCIATED WITH IN CECIL COUNTY:
LIST ACTIVITIES OR FUNCTIONS YO	U HAVE PARTICIPATED IN CONCERNING	G THE CECIL COUNTY PUBLIC LIBRARY:

AREAS OF INTEREST Please indicate those areas in which your knowledge would be of benefit to the Library Board. ☐ GOVERNMENTAL RELATIONS ■ BUSINESS ADMINISTRATION ☐ FINANCIAL MANAGEMENT ☐ ECONOMIC DEVELOPMENT ☐ PUBLIC RELATIONS ☐ FUNDRAISING ☐ MANAGEMENT & SUPERVISION ☐ OTHER (Please Describe) ADDITIONAL INFORMATION WHAT DO YOU SEE AS THE PUBLIC LIBRARY'S ROLE IN THE FUTURE? WHAT DO YOU FEEL ARE THE RESPONSIBILITES OF A BOARD MEMBER TO THE LIBRARY? ADDITIONAL INFORMATION YOU THINK WOULD BE APPROPRIATE FOR OUR CONSIDERATION:

APPLICANTS CERTIFICATION

Signature of Applicant	

I hereby guarantee the correctness and truthfulness of the information shown on this application.