

BOARD OF TRUSTEE

Application Form

Candidate Name								
Mailing Address					Years of Residency ———			
City	State	Zip	Email					
Home Phone		Work Phone _		Cell Phone				
Current Position								
Current Employer								
Relevant Experience and/or employment (please attach resume).								
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IMPORTANT: This application must be received no later than

If you have any difficulties with this form, please email Kathy Taylor, Executive Director, at ktaylor@tmcomservices.org

RULES: All applicants must be a resident of Tipp City Incorporated or Monroe Township and 18+ years of age.

All elements of this process are overseen by the Nominations Committee and its final decision is binding. If selected, you must agree to a background check.

Please share any other information application as a board candidate member (include extra sheet if net (ie: fundraising, strategic planning).	including why cessary). Plea	you are interested i	n serving as	a board
Signature:			Date:	
Do you wish your details to be re	tained for futu	re vacancies?	□ Yes	□ No
FOR BOARD USE ONLY				
☐ Nominee reviewed by the comm	Date			
☐ Nominee proposed to the board.	Date			
☐ Board Action:	□ Elected	□ Rejected	Date	
☐ Nominee has had a personal meeting with either Executive Director, Board Chair, or other Board Member (circle one).				