

APPLICATION FOR BOARD MEMBERSHIP

Name:		
Address: ———		
Phone Number:		
E-Mail Address:		
Check appropriate box	: New Appointment	Reappointment
Why are you interested	d in serving on this Board?	
What are your qualifica	ations to serve on this Board	d?
Please list your current	and past involvement with ot	ther Boards, Commissions or Taskforces
The following individua	als are qualified to comment	t on my capabilities:
Name	Address	Phone Number
Resume Attached: Ye	s No	
Please return completed a	pplication and resume (if you wish Lake County Visitors Application/Attn: Nei 105 Main Street, B1 Painesville, Ohio 4 NStein@mylakeoh.c	s Bureau Board iil Stein 101 14077