



**APPLICATION FOR CANDIDACY, BOARD OF TRUSTEES,
WAYNOKA REGIONAL WATER AND SEWER DISTRICT**

NAME: _____ LOT NO.: _____

ADDRESS: _____ CITY: _____ STATE, ZIP: _____

PHONE: _____ CELL: _____ E-MAIL: _____

The undersigned herewith files an application as a candidate for election to the Board of Trustees of the WRWSD. By signing this application below, I herewith certify that all information contained in this application and all attachments are true and correct to the best of my knowledge and belief.

1. All dues, assessments, water charges, sewer charges, mowing charges, and fines, if any, are paid in full as they have been currently invoiced to me.
2. A recent photograph is attached. A good quality, passport type photo is preferred.
3. A brief resume is attached, stating my background, both educational and experience, and containing a brief statement as to my reasons for filing this application and how I feel I can be of benefit to the Board. Resume is not to exceed 150 words.
4. A brief statement is attached as to why the WRWSD Board should consider me as a potential Trustee.

DATE: _____

Signature of Applicant

INSTRUCTIONS: (Any deviations will result in application being rejected.)

- APPLICATION MUST BE ON THIS FORM
- APPLICATION MUST BE SIGNED BY THE APPLICANT
- APPLICATIONS MAY BE HAND DELIVERED OR MAILED TO:
WRWSD NOMINATING COMMITTEE
1 WAYNOKA DRIVE
SARDINIA, OH 45171
- APPLICATION MUST BE RECEIVED BY THE OFFICE BY MONDAY, SEPT. 28, 2020, 4 PM. NO EXCEPTIONS TO THIS DEADLINE WILL BE ALLOWED.

VERIFICATIONS: (To be completed by the Nominating Committee)

1. All dues, assessments and other debts have been paid.
2. A recent photograph and brief resume are attached.

Nominating Committee Chairperson

Rev. 07-2020