CHAMPAIGN COUNTY APPOINTMENT REQUEST FORM Water Public District

NA	AME:			
ΔΤ	onress.			
111	DDRESS: Street	City	State	Zip Code
EN	MAIL:	PHON	E:	
	☐ Check Box to Have Email Address Reda			
Pι	JBLIC WATER DISTRICT:			
BE	EGINNING DATE OF TERM:	ENDING D	ATE:	····
yo con	the Champaign County Executive appreciates your background and philosophies will assist the complete the following questions by typing or legibly DR APPOINTMENT, OR REAPPOINTMENT, ND AN INTERVIEW WITH THE COUNTY EX	County Executive in esta y printing your response. , CANDIDATE MUST C	blishing your IN ORDER T	qualifications. Please O BE CONSIDERED
1.	Are you a resident of Champaign County? ☐ Yo	es 🗆 No		
2.	Do you live within the water district? \square Yes \square	l No		
3.	What experience and background do you have w	hich you believe qualifies	s you for this a	ppointment?
4.	What is your knowledge of the appointed body's	s operations, property hold	lings, staff, tax	es, and fees?
5.	Please list any boards, commissions, or public pocurrently serving.	ositions to which you have	e been appointe	ed or elected and are

6.	Can you think of any relationship or other reason that might possibly constitute a conflict of interest if you are selected to serve on the body for which you are applying? (This question is not meant to disqualify you; it is only intended to provide information.) \square Yes \square No If yes, please explain:				
7	Would you be available to regularly attend the scheduled meeting of the appointed body? ☐ Yes ☐ No If no,				
•	please explain:				
	The facts set forth in my application for appointment are true and complete. I understand this application is a document of public record that will be on file in the Office of the County Executive.				
	Signature				
	Date:				