

Gilbert-Summit Rural Water District

BOARD MEMBER APPLICATION FORM

▶ PLEASE PRINT LEGIBLY ◀

PERIOD APPLIED FOR (6 Yrs) _____ to _____

NAME _____ TITLE _____

DATE OF BIRTH _____ SOCIAL SECURITY # _____ - _____ - _____

SERVICE ADDRESS _____
Street/Apt. # _____ City/State _____ Zip _____

HOME ADDRESS _____
(If different from above) Street/Apt. # _____ City/State _____ Zip _____

TELEPHONE No. (Home) _____ (Work) _____
(Cell) _____

DATE OF WATER SERVICE MEMBERSHIP _____

HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENSE?: _____

NOTE: Criminal offenses include felonies, misdemeanors and summary offenses. Omit minor vehicle violations and any offense before 17th birthday which was adjudicated in juvenile court or under a youthful offender law.

IF YES, PLEASE LIST CHARGE(S): _____

DID YOU RECEIVE A COPY OF THE BOARD POLICY?: ✓ YES _____ NO _____

DO YOU HAVE ANY IMMEDIATE FAMILY RELATIVES ON THE BOARD OR EMPLOYED BY THE DISTRICT?: ✓ YES _____ NO _____

IF YES, PLEASE FURNISH NAME, RELATIONSHIP AND POSITION HELD: _____

REFERENCES: Give the names of person's not related to you, whom you have known at least one year.

NAME	ADDRESS	TEL. NO	YEARS ACQUAINTED
1.			
2.			
3.			

Signature: _____ Date: _____