East Clinton Board of Education

Sabina Public Library/New Vienna Branch Library

Application for School District Free Public Library **TRUSTEE**

The East Clinton Board of Education bears the responsibility, per O.R.C. 3375.15, to make all appointments to the board of library trustees. The purpose of this application is to measure interest in the position and, when necessary, to determine a successor in the position.

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Last Name First Name Middle Name

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Address

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City State Zip Code Home Phone

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Occupation Cell Phone Work Phone

**Employment History:**

**(Current/most recent first)**

**Dates Position Organization**

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**Library Trustee Candidate Questionnaire:** Please answer the following questions in brief and concise answers:

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| --- |
| 1. Why are you interested in becoming a library trustee? |
| 2. How often and for what reasons do you visit the library? |
| 3. What is the purpose of a public library? |
| 4. What are your beliefs about the role of the trustees?  |
| 5. What experiences have you had that would assist you in being a productive/contributing trustee? |

**References:**

|  |  |  |
| --- | --- | --- |
| **Name** | **Address** | **Phone** |
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|  |  |  |
|  |  |  |

**Circle Yes or No**

Are you at least 18 years old? Yes No

Are you a registered voter in the school district? Yes No

Have you ever been arrested for or convicted of a felony? Yes No

Do you have children of school age? Yes No

 If yes, where do they attend? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is any member of your immediate family an employee of East Clinton? Yes No

 If yes, whom? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is any member of your immediate family an employee of the library? Yes No

 If yes, whom? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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 Signature of Applicant Date

**\* Return completed applications to East Clinton Board of Education Office**

 **97 Astro Way, Sabina, Ohio 45169**