APPLICATION FOR THE POSITION OF ASSOCIATE SUPERVISOR FOR WHATCOM CONSERVATION DISTRICT

SECTION 1. PERSONAL INFORMATION Name Residential Address:_____ City:____ Zip Code:______ State:_____ Mailing Address (If different from residence):_____ City:_____ Zip Code:______ State:_____ Phone Number (Home):_____ Phone Number (Cell): _____ Email Address: **SECTION 2. QUALIFICATIONS** 1. Are you a Washington State Registered Voter? Yes □ No □ 2. Are you an operator of a farm within Whatcom County? Yes □ No □ 3. If you are an operator of a farm, do you have a farm plan? Yes $\ \square$ No $\ \square$ **SECTION 3. GENERAL EXPERIENCE, SKILLS AND TRAINING** 4. What is your current occupation? 5. If you are retired, what was your most recent occupation? 6. Please describe any experience(s) you have serving on any kind of board or committee (i.e., servicing on any group with authority to make decisions or make recommendations to a decision-making body or individual.)

7.	Please describe any training, skills and experience you have that will help you perform the duties of a conservation district associate supervisor.
SEC	CTION 4. CONSERVATION DISTRICT EXPERIENCE
8.	Why are you interested in serving as a conservation district associate supervisor?
9.	What do you know about the role and responsibilities of the conservation district?
10.	Have you ever served as conservation district supervisor or associate supervisor? Yes $\ \square$ No $\ \square$
11.	If you answered 'yes' to Question #21, on what conservation district board did you serve as a supervisor or associate supervisor and for how long?
	DISTRICT NAME STATE YEARS OF SERVICE
12.	Have you reviewed the mission statement, annual plan, and long-range plan of the Whatcom Conservation District? Yes $\ \square$ No $\ \square$
P	lease print and mail to 6975 Hannegan Road, Lynden WA 98264

Please print and mail to 6975 Hannegan Road, Lynden WA 98264 OR save and email to wcd@whatcomcd.org with the subject line Associate Supervisor