

# Phoenicia Library



The Marilyn Dershowitz Memorial Building  
PO Box 555, Phoenicia NY 12464

## Trustee Application

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_ (Work) \_\_\_\_\_

Email: \_\_\_\_\_

Education: \_\_\_\_\_

\_\_\_\_\_

Specialized Training/Skills: \_\_\_\_\_

\_\_\_\_\_

Employment (Current and Past): \_\_\_\_\_

\_\_\_\_\_

Please list all boards and committees you have served on (civic, religious, social, political, professional):

\_\_\_\_\_

\_\_\_\_\_

Why are you interested in serving on the Library Board of Trustees? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Specific talents or abilities you have to offer the library board: \_\_\_\_\_

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On which committees would you like to work? What area of the board's work are you most interested in?

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Availability? Do you have a time period when you are not available? \_\_\_\_\_

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References: Please list two people other than members of your family, who know you. Please give complete information.

| <u>Name</u> | <u>Relationship</u> | <u>Phone</u> | <u>Email</u> |
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Please list any groups or organizations that you could serve as a liaison to on behalf of Phoenicia Library:

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I certify that the answers I have given on this application are true and complete to the best of my knowledge.

SIGNATURE : \_\_\_\_\_ DATE: \_\_\_\_\_