

**APPLICATION FOR BOARD OF DIRECTOR'S POSITION OF THE  
ROCK ISLAND WATER SUPPORT CORPORATION**

This application form must be completed and submitted to the Corporation's office (pmt box or to secretary) no later than \_\_\_\_\_ in order to be placed on the ballot.

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

Mailing Address: City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Physical Address: City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (cell) \_\_\_\_\_ (home) \_\_\_\_\_

Water Member since \_\_\_\_\_ (year)

**Qualifications:**

Previous Board of Director Experience: \_\_\_\_\_

Business/Government Experience: \_\_\_\_\_

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

Personal Statement: (why you want to apply for a Director's position)

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

**Affirmation and Pledge to Serve:**

I, \_\_\_\_\_ am at least 18 years of age on the first day of the director term; am a member of the Corporation; have not been determined by a court exercising jurisdiction to be totally mentally incapacitated or partially mentally incapacitated without the right to vote; have not been finally convicted of a felony; am not immediately related to a current director unless there are separate memberships, am a property owner and I am current on billings from the water department and have a consistent good pay record.

If elected as a director on the Corporation's Board of Directors, I pledge to do my best to attend all meetings, regular or called, as designated by the board. I will read the Corporation's By-Laws and uphold them.

Under penalties of perjury, I declare that I have reviewed the information presented in this Application, and to the best of my knowledge the information is true, correct and complete.

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

Date reviewed by Corporation: \_\_\_\_\_ Initials: \_\_\_\_\_