



## Board Application for Appointment/ Reappointment

### Contact Information

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
E-Mail Address	
Appointment or Reappointment	<input type="checkbox"/> Appointment <input type="checkbox"/> Re- Appointment
Which Board Are You Applying For	
Are You Registered to Vote?	<input type="checkbox"/> Yes <input type="checkbox"/> No

**IF YOU ARE UP FOR RE-APPOINTMENT YOU ONLY HAVE TO FILL IN THE CONTACT INFORMATION INDICATED ABOVE, THE AGREEMENT SIGNATURE SECTION AND THE ACKNOWLEDGEMENT SECTION IN WHICH YOUR NAME AND INTEREST IN RE- APPOINTMENT WILL BE DISCUSSED AT THE COMMISSION MEETING PER NRS 241.033**

### Interests

Why are you interested in this position

### Special Skills or Qualifications

If this Board/ Commission/ Committee calls for a specific type member, please indicate the position you are applying for:

Employment Experience/ Profession (a resume may be attached)

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Organization/ Community Experience

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**Agreement and Signature**

I understand the role and responsibility of membership on this board or commission and am willing to serve. If appointed, I will attend required meetings and training and will adhere to pertinent bylaws. I understand that some appointments require a Financial Disclosure Form to be submitted to the Nevada State Ethics Commission. I can certify, to the best of my knowledge, the information I have provided in this application is true and correct. If the information provided is false or incomplete, it shall be sufficient cause for disqualification or removal.

Name (printed)	
Signature	
Date	

**Acknowledgment**

**ACKNOWLEDGMENT**

I understand that my interest in Appointment/ Re-Appointment to the \_\_\_\_\_  
(Board or Commission)  
will be discussed at the Elko County Board of Commissioners meeting on **December 6, 2017** .

Name (printed)	
Signature	
Date	

I waive any rights of notification as per NRS 241.033 by signing this acknowledgment.

**Application**

**APPLICATION WILL BE RETAINED FOR TWO YEARS**

**PLEASE RETURN APPLICATION TO:**

Elko County Manager's Office  
Attention: Michele Petty or Shyann Edgar  
540 Court Street, Suite 101, Elko Nevada 89801  
Phone: (775) 738-5398  
Fax: ( 775) 738-8535