



Mission Statement

Provides library users of all ages with access to resources to help them live, learn, and grow.

Trustee Application

Please print

Last Name	First Name	Middle Initial	Date of Application
Street address			Home Phone
City, State, Zip			Business Phone
E-mail address			Cell Phone

Education

	NAME OF SCHOOL	COURSE OF STUDY
High School		
College		
Other (Specify)		

Occupation

Employed by	Title
Address (City & State)	Responsibilities
Business Phone	Years in Present Occupation

Previous Employment

Name of employer	From: Month ____ Year ____	Position held
Address (City & State)	To: Month ____ Year ____	Responsibilities

Skills

The Board of Trustees values a balance of experiences and skills. What skills do you feel you can bring to the board?

Please check all that apply

<input type="checkbox"/> Accounting and Finance	<input type="checkbox"/> Fundraising	<input type="checkbox"/> Public Relations	Other: _____
<input type="checkbox"/> Business Management	<input type="checkbox"/> Marketing	<input type="checkbox"/> Human Resources	_____
<input type="checkbox"/> Law/Government	<input type="checkbox"/> Facilities Management	<input type="checkbox"/> Strategic Planning	_____

Availability

The Board of Trustees meetings are regularly scheduled on the third Monday of each month at 5:30pm - 7:00pm.

Are you available to attend meetings at that time? Yes No

Are you able and willing to contribute additional time for committee meetings and events? Yes No

Please list membership in community or professional organizations, volunteer work and any participation in civic activities. _____

Why do you wish to serve on the Board of Trustees of the Tuscarawas County Public Library?

Please describe your view of the Library's role in the community.

Do you have a Tuscarawas County Public Library card? Yes No
How long have you lived in Tuscarawas County? _____

Are you related to, or otherwise closely associated with anyone now employed by the Tuscarawas County Public Library or the Board of Trustees? Yes No
If so, please give person's name: _____

I certify that I have read the Job Description for the Tuscarawas County Public Libray Trustee and that all of the information on this form is true to the best of my knowledge.

Signature: _____ Date: _____

Thank you! We appreciate your interest in serving our Library and the community. The application process is similar to an employment process. Applications will be screened and selected individuals will be interviewed by the Board President and Library Director. If you are selected as a candidate, the Library Director will contact you to set up an interview.

Please return this form to: Attn: Board President - Tuscarawas County Public Library
121 Fair Ave NW, New Philadelphia, OH 44663