

**LORAIN COUNTY BOARD MEMBER
BACKGROUND INFORMATION**

MALE:

FEMALE:

NAME: _____

ADDRESS: _____ ()

Street

Phone

City State Zip Email

EMPLOYER: _____ ()

Phone

WORK ADDRESS: _____

Street

City

State

Zip

BOARD(S) YOU ARE INTERESTED IN SERVING ON: _____

PLEASE DESCRIBE ANY WORK RELATED RESPONSIBILITIES THAT WOULD
BENEFIT YOUR SERVICE ON THIS BOARD:

PLEASE DESCRIBE ANY PAST OR PRESENT EMPLOYMENT, EDUCATION, OR
VOLUNTEER WORK THAT WOULD ASSIST YOU ON THIS BOARD:

ALL BOARDS ARE A PART OF COUNTY GOVERNMENT AND THE BOARD OF
COUNTY COMMISSIONERS APPOINTS ITS MEMBERS.

DATE: _____ SIGNATURE: _____

PLEASE RETURN TO: Lorain County Board of Commissioners
Board Applications / Attn: Clerk
226 Middle Avenue, Elyria, Ohio 44035

THANK YOU FOR YOUR INTEREST.