

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 5pm 4/15/25 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 they have 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: _____