## **DeKalb County Soil & Water Conservation District**Board Member Self-Nomination Form

Do you me	et the qualific	ations to be	e a Soil & Wa	ter Conse	ervation Dis	strict (SWCD)	Board Member?
Yes	No	-					
Have you b	een a residen	t taxpaying	citizen of De	Kalb Coı	unty for at le	east 2 years?	
Yes	_ No	-					
Have you r	eviewed the S	WCD Boar	rd Member Jo	b Descrij	otion?		
Yes	_ No	-					
Do you und	derstand the ro	oles and res	ponsibilities o	of a SWC	D Board M	lember?	
Yes	No	-					
Can you de	evote the time.	, resources,	and energy re	equired fo	or a SWCD	Board Memb	er?
Yes	_ No	-					
Are you wi	lling to attend	l meetings r	egularly for tl	he duration	on of your to	erm?	
•	_ No	_			·		
Are you wi	lling to partic	ipate in nec	essary trainin	g for SW	CD Board	Members?	
•	_ No	-	Ž				
Signature							
Print Name						Date	
Address						Area	
Phone				E-mail		Township	