

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

Do you meet the qualification for being a Soil & Water Conservation District (SWCD) Board Member?

Yes                  No

Are you a resident taxpaying citizen for 2 year in the Stoddard County SWCD?

Yes                  No

Have you reviewed the SWCD Board Member job Description?

Yes                  No

Do you understand the roles and responsibilities of a SWCD Board Member?

Yes                  No

Can you devote the time, resources, and energy required for a SWCD Board Member?

Yes                  No

Are you willing to attend meetings regularly for the duration of your four-year term?

Yes                  No

Are you willing to participate in necessary training for the SWCD Board Members?

Yes                  No

\_\_\_\_\_

Signature

\_\_\_\_\_

Print Name

\_\_\_\_\_

Date

Mailing Address:

\_\_\_\_\_  
\_\_\_\_\_

Phone Number:

\_\_\_\_\_