

# Catskill Public Library Board of Trustees

## Application

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City, State, Zip:** \_\_\_\_\_

**Telephone: (Day)** \_\_\_\_\_ **(Mobile)** \_\_\_\_\_

**E-mail Address:** \_\_\_\_\_

**Education:** \_\_\_\_\_

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

**Occupation:** \_\_\_\_\_

**How long have you lived in the library's district?** \_\_\_\_\_ years.

**Employment experience (firm and type of work) :** \_\_\_\_\_

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

**Membership in community organizations (if applicable, please list offices held) as well as participation in civic activities:**

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

**Are you related to, or otherwise closely associated with anyone now employed by the Catskill Public Library or on the Board of Trustees? If yes, please list.**

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**State briefly your reasons for wishing to serve on the Catskill Public Library Board of Trustees.**

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**Indicate what special skills, talents, interests, educational background or experiences qualify you to serve on the Library Board.**

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**If chosen to serve on the Library Board, what would you want to accomplish during your term of office?**

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**Please return this form along with your resume to the attention of:**

**President, Board of Trustees**

**Catskill Public Library**

**1 Franklin St.**

**Catskill, NY 12414**