Malvern-Hot Spring County Library Board of Library Trustees Application



Contact Information		
Name		
Street Address		
City ST ZIP Code		
Home Phone		
Cell Phone		
E-Mail Address		
Employment Information (if applicable)		
Business Name		
Position		
Street Address		
City ST ZIP Code		
Work Phone		
E-Mail Address		
Availability		
Are you able to meet as needed for Board meetings?		
No	Yes	
Are you able and willing to advocate for the library as needed?		
No	Yes	
Special Skills or Qualifications		
Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports.		

Other Commitments		
Do you have any commitments to other Boards, Councils, etc.? (if so, list)		
No	Yes	
Are you willing and able to uphold the interest of the library and abide by all adopted rules and regulations, including those set forth by the American Library Association?		
No	Yes	
Agreement and Signature		
By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a member of the Board of Library Trustees, any false statements, omissions, or other misrepresentations made by me on this application may result in the consideration of my removal from the Board by the Quorum Court or by vote of the Board of Library Trustees.		
Name (printed)		
Signature		
Date		