

**APPLICATION FOR MEMBERSHIP ON
Sierra Economic Development Corporation (SEDCorp)
BOARD OF DIRECTORS**

REFERRED BY: _____

PLEASE PRINT OR TYPE:

NAME: _____

RESIDENCE ADDRESS: _____

MAILING ADDRESS: _____

PHONE NUMBERS: HOME: _____ BUSINESS: _____

CELL: _____

IN WHICH SUPERVISORIAL DISTRICT DO YOU RESIDE? _____

ARE YOU AVAILABLE FOR MEETINGS THE FIRST WEDNESDAY OF EACH MONTH FROM 1:00-3:00? _____

EMPLOYMENT EXPERIENCE: _____

ORGANIZATION AND COMMUNITY EXPERIENCE: _____

OTHER EXPERIENCE WHICH YOU FEEL WOULD BE HELPFUL TO BRING TO THE ATTENTION OF BOARD MEMBERS IN MAKING THIS APPOINTMENT: _____

EDUCATION (INCLUDE HIGH SCHOOL, COLLEGE AND/OR UNIVERSITY, AND GRADUATE STUDY): _____

WHY WOULD YOU LIKE TO BE APPOINTED?: _____

A RESUME CONTAINING OTHER PERTINENT INFORMATION ABOUT YOURSELF WOULD BE HELPFUL TO THE BOARD MEMBERS IN EVALUATING YOUR APPLICATION.

DATE: _____ SIGNATURE: _____

APPLICATION MUST BE SUBMITTED TO SEDCorp OFFICE
560 WALL STREET, STE. F, AUBURN, CA 95603