



Clark 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	
What is your availability for meeting attendance? (days and times)	
Are you able and willing to advocate for the library, funding, etc. as needed?	

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)	
Are you willing and able to uphold the interest of the library and abide by all adopted rules, regulations, and standards - including those set forth by the American Library Association?	

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	