

Soledad-Mission Recreation District-

P.O. Box 1650 Soledad, CA 93960

Buildingcommunity@soledadrec.org

Board of Directors Application Form

Term of Service	Term Begins	Term Ends
County Appointment: 4 years	Immediately	1/31/2023
City Appointment: 4 years	Immediately	1/31/2025

This APPLICATION IS DUE: JANUARY 24, 2022 to:

	County Seat Appointments: Residents living within District Boundaries	City of Soledad Seat Appointments: Residents living within the Soledad city limits.
IN PERSON	570 Walker Dr.	248 Main St.
By Mail	P.O. Box 1650 Soledad, CA 93960	248 Main St. Soledad, CA 93960
By Email	buildingcommunity@soledadrec.org	

You will be advised of your appointment by the appointing body and the Soledad-Mission Recreation District.

Candidate Name: _____ Date: _____

Home Address:

Mailing Address (*if different from home address*):

Preferred Contact Phone Number:

Email Address:

Current Position/JOB Title:

Current Employer:

Please describe your relevant experience and or/employment. You may also submit an attached resume.

Please Describe the area(s) of expertise/contribution you feel you can make to further the mission of the Soledad-Mission Recreation District.

Please list prior experience serving as a Board Member for other non-profit organizations, public agencies, publicly traded companies, membership-based organizations, or in a Board Member capacity.

What other volunteer commitments do you currently have?

The Soledad-Mission Recreation District currently meets on the 4th Tuesday of the month at 6 PM. The meeting generally lasts between 2 and three hours. Do you have any standing commitments that create a scheduling conflict for you? Check for Yes _____ or No _____

Why are you interested in serving as a Board Member for the Soledad-Mission Recreation District?

Please share any other information you feel important for consideration of your application to serve as a SMRD Board Member?

For Board and Administrative Use only- County Appointments only

		Candidate has had a personal meeting with either Executive Director or Chair to the Board of Directors	
		Candidate reviewed by committee for recommendation.	
		Candidate application submitted to County for appointment. (All completed Applications must be submitted)	
		Board Recommended: Yes/No	
		Candidate was appointed by County for Appointment	

This Application is complete and accurate:

Applicant Signature _____ Date _____