

# RECOMMENDATION FOR APPOINTMENT OR REAPPOINTMENT OF CONSERVATION DISTRICT DIRECTOR

During a board meeting held on \_\_\_\_\_, \_\_\_\_\_, Directors of the \_\_\_\_\_ Conservation District

took action for:

**Reappointment**

**Appointment due to:**  Resignation  Expiration of Term  Death

of: \_\_\_\_\_

Recommendation(s):

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

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

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

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

For reappointment, the incumbent director attended \_\_\_\_\_ of \_\_\_\_\_ regular scheduled meetings during the immediate past term.

\*If director did not attend 75% of regular scheduled meetings during the immediate past term, please attach a letter from the board outlining why the recommendation is being made.

Copy of Cooperator Agreement or Application is Attached

I have verified with the \_\_\_\_\_ County Election Board that the recommended person(s) is a registered voter within the boundaries of said conservation district.

\_\_\_\_\_  
District Representative

\_\_\_\_\_  
Date

\_\_\_\_\_  
Board of Directors Representative

\_\_\_\_\_  
Date

*OCC Use Only*  
Agenda/Action Date: \_\_\_\_\_

*OCC Use Only*  
Director ID: \_\_\_\_\_

*OCC Use Only*  
District No: \_\_\_\_\_

**TO BE FILLED OUT BY APPLICANT:**

(Please print legibly, all fields required)

Name:			
Date of Birth:			
Mailing Address (street/city/zip):			
Primary Phone:	Cell Phone:	Alternate Phone:	Cell Phone:
E-mail Address:			
Conservation District:			
<p>Have you previously served on this or any other Conservation District Board? _____</p> <p>If yes, list district name and dates served or date began serving if no break in service:</p> <p>_____</p>			

Signature: _____ Date: _____
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**A COPY OF YOUR COOPERATOR AGREEMENT OR *APPLICATION FOR COOPERATOR AGREEMENT* MUST BE SUBMITTED WITH THIS FORM.**