

**LORAIN COUNTY BOARD MEMBER
BACKGROUND INFORMATION**

MALE:

FEMALE:

NAME: _____

ADDRESS: ()
Street _____ Phone _____

City _____ State _____ Zip _____ Email _____

EMPLOYER: ()
Phone _____

WORK ADDRESS:
Street _____ City _____ State _____ Zip _____

BOARD(s) YOU ARE INTERESTED IN SERVING ON: _____

PLEASE DESCRIBE ANY WORK RELATED RESPONSIBILITIES THAT WOULD
BENEFIT YOUR SERVICE ON THIS BOARD: _____

PLEASE DESCRIBE ANY PAST OR PRESENT EMPLOYMENT, EDUCATION, OR
VOLUNTEER WORK THAT WOULD ASSIST YOU ON THIS BOARD: _____

ALL BOARDS ARE A PART OF COUNTY GOVERNMENT AND THE BOARD OF
COUNTY COMMISSIONERS APPOINTS ITS MEMBERS.

DATE: _____ SIGNATURE: _____

PLEASE RETURN TO: Lorain County Board of Commissioners
Board Applications / Attn: Clerk
226 Middle Avenue, Elyria, Ohio 44035
THANK YOU FOR YOUR INTEREST.