

# Wasatch County Board Member Application

Date: \_\_\_\_\_

Name of Board Applying For: \_\_\_\_\_

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

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

City/State/Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

List all Qualifications:

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Please tell us why you would like to become a Board Member for Wasatch County:

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List any additional experience, education or training you have had that would help you in this position:

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Signature: \_\_\_\_\_

Date: \_\_\_\_\_