

**APPLICATION
BOARD OF TRUSTEES VACANCY**

NAME: _____

ADDRESS: _____

PHONE: _____ **EMAIL:** _____

QUALIFICATIONS:

Eligibility: Any LYON-COFFEY ELECTRIC member whose primary residence is within District 2* may become a Trustee, except for employees of the Cooperative or a competing enterprise, or a business that supplies LYON-COFFEY ELECTRIC with goods or services.

Trustees' Duties: The Trustees establish policies and direction for the Cooperative. The Board meets once a month, but the Trustees at times are asked to represent the Cooperative at additional meetings.

Trustees' Pay: The Trustees are not paid a salary. They receive a per diem for attendance at the monthly board meetings, mileage and expenses for Cooperative related travel and coverage under the Cooperative's group insurance plan.

How long have you been a member of Lyon-Coffey Electric? _____

What is your current and/or previous employment history?

What relevant business experience will you bring to the Board?

What is your educational background _____

COMMUNITY INVOLVEMENT:

List any restrictions that would limit your time to devote to LYON-COFFEY ELECTRIC issues or your presence at Monthly Board Meetings:

Please list your primary qualifications that make you the **best** candidate for the LYON-COFFEY ELECTRIC Board

The Board uses iPads and some communications are completed by e-mail. Do you have any limitations related to the use of electronics or the Internet?

Have you made more than one (1) late payment to LYON-COFFEY ELECTRIC during the prior 12 months? Yes _____ No _____

Has LYON-COFFEY ELECTRIC made any collection attempts on your account during the prior 12 months? Yes _____ No _____

Have you issued more any non-sufficient funds checks to LYON-COFFEY ELECTRIC during the prior 12 months? Yes _____ No _____

Have you been convicted of a felony within the prior ten (10) years? Yes _____ No _____

Are you at least 18 years of age? Yes _____ No _____

Are you an employee of LYON-COFFEY ELECTRIC? Yes _____ No _____

Are you a close relative of an employee of LYON-COFFEY ELECTRIC: Yes _____ No _____

Are you a close relative of a current Trustee? Yes _____ No _____

Is your **primary residence** in the LYON-COFFEY ELECTRIC district for which you are a candidate? Yes _____ No _____

5. Are you in any way employed by or financially interested in a competing enterprise to the Cooperative? Yes _____ No _____

Do you have a business substantially engaged in selling electrical or natural gas appliances, fixtures or supplies to LYON-COFFEY ELECTRIC ? Yes _____ No _____

HAVE YOU EVER SERVED ON A BOARD BEFORE? IF SO, PLEASE LIST WHERE and

WHEN _____

PLEASE RETURN THIS FORM TO LYON-COFFEY ELECTRIC HEADQUARTERS BY **July 28, 2017.**

LYON-COFFEY ELECTRIC COOPERATIVE, INC

PO BOX 229

1013 N. 4TH STREET

BURLINGTON, KS 66839

I, _____, under penalty of perjury, do declare that I meet all the requirements of the LYON-COFFEY ELECTRIC Bylaws. I also understand that failure to disclose any information that would prohibit my nomination, according to of the Bylaws, will disqualify me from serving as a Trustee on the Board of LYON-COFFEY ELECTRIC. I hereby authorize LYON-COFFEY ELECTRIC to release my LYON-COFFEY ELECTRIC account information to the Board of Trustees with the understanding that the Board will decide the eligibility of each candidate.