## **City of Soledad**

248 Main Street, Soledad, CA 93960 Phone: 831-223-5014 darlene.noriega@cityofsoledad.gov

## Board of Directors Application Form

Term of Service	Term Begins	Term Ends
County Appointment: 4 years	01/2025	01/2029
City Appointment: 4 years	01/2025	01/2029

## This APPLICATION IS DUE: Open Until Filled

	County Seat Appointments:	City of Soledad Seat Appointments:
Residents living within District		Residents living within the Soledad city
	Boundaries	limits.
IN PERSON	570 Walker Dr.	248 Main St.
By Mail	P.O. Box 1650 Soledad, CA 93960	PO BOX 156. Soledad, CA 93960
By Email	buildingcommunity@soledadrec.org	darlene.noriega@cityofsoledad.gov

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/employme	ent. 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 lit prior experience serving as a Board Member for other non-profit organizations, public agencies, publicly tradec 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 4 <sup>th</sup> Tuesday of the month at 6 PM. The meeting generall lasts between 2 and three hours. Do you have any standing commitments that create a scheduling conflict for you? Yes_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