



# WHITEWATER VALLEY RURAL ELECTRIC MEMBERSHIP CORPORATION

## DIRECTOR CANDIDATE APPLICATION

Please complete this form and submit by **November 1st** or by the date of the nominating committee meeting whichever is later in order to be considered as a candidate for the Board of Directors. Applications may be submitted in any one of the following ways:

- 1) by email to [NominatingCommittee@wwvremc.com](mailto:NominatingCommittee@wwvremc.com). A confirmation of receipt will be returned by email.
- 2) by Certified Mail to Whitewater Valley REMC, Attn. Nominating Committee Chairman, P.O. Box 349, Liberty, IN 47353.

All information will be treated as confidential and for the sole purpose for which it was submitted. Criminal background checks may be completed for all Board of Director Applicants and Board Nominees. By signing and submitting this Application, the undersigned consents to allow Whitewater Valley REMC to complete a criminal background check for the undersigned Applicant.

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ CELL \_\_\_\_\_ E-MAIL \_\_\_\_\_

OCCUPATION \_\_\_\_\_ EMPLOYER \_\_\_\_\_ YEARS \_\_\_\_\_

**Please refer to Attachment #2a Director Candidate Information Sheet that includes the Cooperative Bylaws Article IV Section 3 Qualifications of Directors.**

Are you a member in good standing (not past due) with this REMC? YES \_\_\_\_\_ NO \_\_\_\_\_

REMC account # \_\_\_\_\_ Service Address: \_\_\_\_\_

Are you related (directly or indirectly) to any employees or Directors of this REMC? Please provide appropriate information: \_\_\_\_\_

Please provide a listing of your educational background:

<u>Institution</u>	<u>Years of Attendance</u>	<u>Degree Received</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Have you ever had a criminal conviction that has not been expunged, excepting misdemeanor traffic offenses?  
YES \_\_\_\_\_ NO \_\_\_\_\_

Have you, or any entity in which you have held a controlling interest, ever filed a Bankruptcy petition that resulted in a loss to this REMC? YES \_\_\_\_\_ NO \_\_\_\_\_

In addition to the questions above do you meet ALL the Qualifications of a Director as stated in Article IV, Section 3 of the Cooperative's Bylaws? YES \_\_\_\_\_ NO \_\_\_\_\_

If NO on any part of Section 3, please document: \_\_\_\_\_

Please describe why you are interested in being considered as a candidate for the Board of Directors of WWV REMC:

---

---

---

What experience do you possess that you feel will help you to fulfill the duties as a member of the Board?

---

---

---

Do you have any experience on other boards or committees such as school boards, hospitals, churches, etc., that you think should be considered in your qualifications? If so, please list.

	<u>Organization</u>	<u>Years Served</u>	<u>Still Serving?</u>	<u>Your Capacity</u>
1.	_____	_____	Y N	_____
2.	_____	_____	Y N	_____
3.	_____	_____	Y N	_____
4.	_____	_____	Y N	_____

Board information is shared electronically via email and apps. Do you have Internet access and proficiency checking and sending email? Yes No

Comments: \_\_\_\_\_

Board membership requires time for meeting preparation; board meeting attendance; attendance at state, regional, and national meetings; and board training and education programs to help board members remain effective in their position. Directors average 20 hours per month on cooperative business. How difficult will it be for you to find time for:

	No Problem	Rare Problem	Real Problem
1. Prepare for and attend monthly board meetings; usually in the evening lasting 2-3 hours?	_____	_____	_____
2. Occasional day meetings or educational training locally or in Indianapolis with at least one month's notice?	_____	_____	_____
3. Possible board committee meetings, usually evening lasting 1-2 hours with one or two weeks' notice?	_____	_____	_____
4. Optional two and three-day seminars or meetings anywhere in the U.S. with usually several months' notice?	_____	_____	_____

Please provide any further information or comments that you feel are important to the consideration of your application for a Board position:

---



---



---

Feel free to attach any supporting information that you feel will help the Nominating Committee in considering your application.

I certify that all information provided herein is true, complete and accurate.

Signed \_\_\_\_\_ Date \_\_\_\_\_