



Shelby Energy Cooperative

A Touchstone Energy[®] Cooperative 

Application for Board of Directors

Shelby Energy Cooperative, Inc.

Name _____

Date _____

**Application for Candidate for Board of Director
Appointment or Election**

DATE: _____ **NAME** _____

Referred by: _____

Please read each item carefully and complete the application in its entirety. ***Special Note:** You are not required to supply any information that is prohibited by Federal, State, or Local law. Shelby Energy Cooperative, Inc., does not discriminate on the basis of race, color, religion, gender, national origin, pregnancy, marital status, citizenship, age, disability, veteran status, or any other legally protected class. You may request assistance in completing this application.*

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PERSONAL DATA:

Name _____ Telephone Number: () _____

 First M.I. Last
Street _____ Box _____ City _____ ST _____ Zip _____

Cell/Digital Phone _____ E-Mail Address _____ @ _____

Are you 21 years old or older? _____

Have you ever been convicted of any crime that involved the use of a weapon? No Yes, please explain:

Have you ever been convicted of any crime that involved the use or possession of an illegal drug? No Yes, please explain:

Have you every been convicted of any crime that involved moral turpitude (dishonesty)? No Yes, please explain:

Have you ever been convicted of any crime against another person? No Yes, please explain:

Have you ever been convicted of any felony? No Yes, please explain:

Have you ever been convicted of any sex offense? No Yes, please explain:

(A criminal record check is required of all Board members)

PROFESSIONAL INFORMATION:

Current Employer:

Employer _____

Address _____

Occupation _____

Title _____

Work Telephone Number: _____

Is your employer supportive of your community service work and will allow you the time needed for Board service?

Yes No Unknown

Retired Community Volunteer

Are you willing and able to attend Board of Director training of _____ hours over _____ years?

Are you willing and able to spend a minimum of _____ hours per month preparing for and attending regular board meetings?

Do you meet each of the following bylaw requirements to serve as a Board of Director?

EDUCATION:

High School (Name and Address) _____

Did you graduate? _____ If no, last grade completed _____ G.E.D. Obtained? _____ Grade Average _____

Colleges (Name and Address) _____

Colleges (Name and Address) _____

Did you graduate? _____ If no, number of hours completed _____ Grade Point Average _____ Degree _____

Major _____ Minor _____ If attending, date of graduation _____

Other Education _____

License(s), including the state of issue and the number:

COMMUNITY INVOLVEMENT:

Please list here any other Boards, Professional Societies, Civic or Charitable work in which you are involved:

	Organization	Role (member/officer)	Years
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____
7.	_____	_____	_____
8.	_____	_____	_____

AVAILABILITY:

Are you willing and able to attend the regular monthly Board meeting in Shelbyville, Kentucky from 9:00 a.m. to 1:00 p.m. on the 4th Thursday of each month? Yes No

Are you willing and able to attend National, Regional and Annual meetings of associated organizations as needed to represent the Cooperative? Yes No

AREAS OF INTEREST:

As a member of the Board of Directors, you may be assigned to work on a committee and assist in various events. Please list here your areas of interest or expertise that you feel you can bring to the Board of Directors of Shelby Energy Cooperative, Inc. This may be your professional expertise in business, management, technology, accounting, law, etc., or specific skills, such as planning and organizing, utility work, event coordination, etc. It is our goal to maximize the talents of our Board members and provide a mutually valuable experience.

Please write any comments here:

I have read, understand and signed the enclosed Conflict of Interest statement and am willing and able to comply with said statement and related policy(s) of Shelby Energy Cooperative, Inc. Yes No

I have read, understand and signed the enclosed Confidentiality Statement and am willing and able to comply with said statement and related policy(s) of Shelby Energy Cooperative, Inc. Yes No

SIGNATURE LINE:

DATE _____ **SIGNATURE** _____

PERMISSIBLE PURPOSE RELEASE FOR BACKGROUND CHECK

INSTRUCTIONS TO APPLICANT: Please read the following information carefully and complete all of the information requested. Be sure you sign and date this form.

As a condition of serving on the Board of Directors of Shelby Energy Cooperative, Inc., I understand that a criminal record check is required. I hereby authorize without reservation, any law enforcement agency to furnish the above mentioned information and hold all of those involved in this process harmless for the information furnished and decisions made. I further authorize ongoing procurement of the above-mentioned reports at any time during my tenure as a member of Shelby Energy Cooperative, Inc.

Signature _____ Date _____

IMPORTANT: Please print clearly. This information will be used to conduct the background search and errors may cause misinformation to be reported about you. This information will be very carefully protected and used only for the purpose for which it is being submitted.

Print your full name as it appears on your official records (Social Security Card):

Street Address _____

City _____ ST _____ Zip Code _____

DOB: ____/____/19____ SSN: _____ Gender: Male Female

Former Names Used _____

Drivers License Number _____