

BOARD CANDIDATE APPLICATION
(Please complete and return to HMC office)

NAME *(as you would like to have it listed on the ballot):* _____

YEARS AS A MEMBER OF HMC: _____

OCCUPATION: _____

PROFESSIONAL OR VOLUNTEER EXPERIENCE: _____

EDUCATION OR TRAINING *(including school, military training, and professional courses)*

Institution	Type of Training
_____	_____
_____	_____
_____	_____

HMC EXPERIENCE ON THE BOARD, COMMITTEES OR OTHER ACTIVITIES:

GOALS: *Please list goals you would have for HMC and Herron Island during your term on the Board.*

CANDIDATE STATEMENT: *Please do not include statements campaigning for or against other candidates.*

Candidate's Signature: _____