

ASOTIN COUNTY LIBRARY
APPLICATION FOR THE BOARD OF TRUSTEES

NAME _____ PHONE _____

ADDRESS _____

Length of residence in Asotin County? _____

Occupational status and background _____

Why are you seeking appointment (or reappointment)? _____

Community activities _____

General remarks _____

Signature

Date

Mail to: Asotin County Commissioners
PO Box 250
Asotin, WA 99402