



Orono Lake Improvement District BOARD MEMBER APPLICATION

APPLICANT INFORMATION

Name: _____ Email: _____

Address: _____ Phone: _____

Employer: _____ Year-round Lake Resident (circle): Yes / No

Statement of Interest: Please state briefly why you are interested in serving on the Orono Lake Improvement District Board.

Relevant Experience: Please describe your educational, professional, civic, or community participation, which may be relevant in serving on this board/commission.

Signed: _____ Date: _____

Applications must be received at the official address of the OLID (below) by Friday, August 7, 2020 to be included on the published ballot, or may be made from the floor at the annual meeting. All nominees made at the annual meeting must be present.

Mail to: Orono Lake Improvement District • P.O. Box 851 • Elk River, MN 55330