

Orono Lake Improvement District BOARD MEMBER APPLICATION

APPLICANT INFORMATION

Name:	Email:
Address:	Phone:
Employer:	Year-round Lake Resident: 🗌 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) <u>by Tuesday, August 1,</u> <u>2023</u> to be included on the published ballot, or may be made from the floor at the Annual Meeting. All nominees made from the floor at the Annual Meeting must be present.

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