



Extension Board Board Member Application

Thank you for your interest in serving on your local Extension Board. Please complete this application and return it to the county office or via email.

Extension Office Address: _____

Extension Email: _____ Extension Phone: _____

Registered voter? Yes ___ No ___ Verified ___

Resident of the county/relevant political subdivision? (county, district, county quadrant, etc.) Yes ___ No ___ Verified ___

Applicant Full Name: _____ County of Residence: _____

Address: _____

City: _____ Zip code: _____

Phone: _____ Email: _____

Occupation/Profession: _____

Preferred method of communication: Phone call Text Email

Qualifications and Experience

List current and past affiliations or organizations you have been involved with: (community, professional, civic, religious, etc.)

Describe your experience in leadership or board roles:

Share why you are interested in serving on the Extension Board:

List the skills and expertise would you bring to the Extension Board: (please highlight experience in agriculture, education, business, community development, advocacy, or other relevant areas)

List any relevant certifications or special trainings: (Master Gardener, Certified Crop Advisor, etc.)

What unique perspectives or experiences would you bring to the board?

Commitment and Availability

The local Extension board meets ___ times per year. Days and times of meetings may change based on board member’s needs, please contact the office for more details. Board members are asked to attend special events or programming on occasion to act as an advocate and learn more about Extension.

Are you able to commit to the time requirements of serving as a board member? Yes No

How many hours per month can you dedicate to board activities, including community engagement?

Do you have any current or potential conflicts of interest in serving on this board, particularly related to land use, agriculture, or educational programs? Yes No

If yes, please describe:

References

Name: _____

Name: _____

Relationship: _____

Relationship: _____

Email: _____

Email: _____

Phone: _____

Phone: _____

Submission

I certify that the information provided in this application is true and complete to the best of my knowledge. I have reviewed the expectations for this position, and I am qualified to serve on the Extension Board for _____ County(ies). My appointment with this board will not conflict with my professional or personal interests.

Signature (Sign or type name)

Date