



LAKE BONANZA WSC

## APPLICATION FOR BOARD OF DIRECTORS 2024

THE APPLICATION FORM MUST BE COMPLETED AND MAILED TO **LAKE BONANZA WSC, P.O.Box 893, Willis,TX 77378-4199** OR YOU MAY DROP OF THE APPLICATION AT **C&R WATER SUPPLY INC.,114 DANVILLE ST. IN WILLIS TEXAS BY 3:00PM ON MARCH 8, 2024** FOR THE APPLICANT’S NAME TO BE PLACED ON THE BALLOT.

**APPLICANT’S NAME:** \_\_\_\_\_

**MAILING ADDRESS:** \_\_\_\_\_

**PHYSICAL ADDRESS (IF DIFFERENT THAN MAILING ADDRESS):** \_\_\_\_\_

**PHONE NUMBER:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

**WATER SYSTEM MEMBER SINCE:** \_\_\_\_\_

**Directors Position sought: Position # 6, Position # 7**

Please circle the Position # you are running for.

**BUSINESS/GOVERNMENT EXPERIENCE** (be specific – tell us how your work experience has prepared you to serve as a board member for the position you are seeking): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**OTHER QUALIFICATIONS OR VOLUNTEER ACTIVITIES** \_\_\_\_\_

\_\_\_\_\_

### PREVIOUS BOARD OF DIRECTOR EXPERIENCE

**CURRENTLY SERVING ON ANOTHER BOARD? NAME OF ENTITY:** \_\_\_\_\_

Position and Term elected/appointed to: \_\_\_\_\_

Contact name and phone (for verification): \_\_\_\_\_

**PRIOR BOARD(S) SERVED ON? NAME OF ENTITY(S):** \_\_\_\_\_

Position and Term(s) elected/appointed to each: \_\_\_\_\_

Contact name and phone of each (for verification): \_\_\_\_\_

\_\_\_\_\_

Please explain why you are no longer serving on this/these boards: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



LAKE BONANZA WSC

**EDUCATION**

High School Grad? Y\_\_\_ N\_\_\_ If no, GED?: Y\_\_\_ N\_\_\_ n/a\_\_\_  
College \_\_\_\_\_ Attended from \_\_\_\_\_ to \_\_\_\_\_  
Major? \_\_\_\_\_

**PERSONAL BIOGRAPHICAL STATEMENT (100-WORD LIMIT)** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**AFFIRMATION AND PLEDGE TO SERVE:** I, \_\_\_\_\_, will be at least 18 years of age on the first day of the director term. I am a member of the Corporation. I have not been determined by a court exercising probate jurisdiction to be totally mentally incapacitated or partially mentally incapacitated without the right to vote. I have not been convicted of a felony or of moral turpitude in the past 10 years. I have reviewed the Corporation's bylaws and certificate of formation and I meet the qualifications set forth therein. These documents can be viewed on the website at [www.lakebonanzawsc.com](http://www.lakebonanzawsc.com).

If elected, I pledge to serve in a director position on the Corporation's Board of Directors. I will do my best to attend all meetings, regular or called, as designated by the board. Under penalties of perjury, I declare that I have reviewed the information presented in this Application, and to the best of my knowledge and belief, the information is true, correct and complete.

I understand and agree that if my application is found to be incomplete or incorrect it will be returned to me for correction and the application will be considered as not received until a new and corrected application is submitted prior to the deadline.

**SIGNATURE OF APPLICANT** \_\_\_\_\_ Date \_\_\_\_\_  
**Must be hand signed, do not type in name.**

<b>ELECTION COMMITTEE REVIEW</b>	
Application received on:	___/___/___ at ___:___.
Received before deadline?	Yes___ No___
Prior board service verified accurate?	Yes___ No___
Does the application appear complete and accurate?	Yes___ No___.