APPLICATION for

VACANT SEAT ON PALOMAR HEATH BOARD OF DIRECTORS

NAME: _____

ADDRESS: _____

_____

PHONE: _____

E-MAIL ADDRESS: _____

DO YOU RESIDE IN PALOMAR HEALTH DISTRICT ELECTION ZONE 1?

YES NO

IF APPOINTED, ARE YOU PREPARED TO SERVE AS A DIRECTOR UNTIL THE NOVEMBER 2022 GENERAL ELECTION?

YES NO

IF APPOINTED, DO YOU ANTICIPATE RUNNING FOR THE DISTRCT ELECTION ZONE 1 SEAT IN THE NOVEMEBER 2022 GENERAL ELECTION?

YES NO

PLEASE STATE WHY YOU ARE INTERESTED IN BECOMING A PALOMAR HEALTH BOARD DIRECTOR: *(You may attach additional pages to this response.)*

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PLEASE LIST AND DESCRIBE ANY APPLICABLE EXPERIENCE YOU POSSESS RELATED TO THIS POSITION: *(You may attach additional pages to this response.)*