

**CCMD HOMEOWNERS' ASSOCIATION
Board of Directors Application Form**

Please PRINT or Type ALL of the information requested below:

Name: _____ Subdivision: _____
Years of Residency: _____ Telephone: _____
Email Address: _____

PERSONAL INFORMATION:

1. Residency (place "x" in box): Full-time: Part-time:
2. Availability (place "x" in box): Employed: Retired:

How much time can you devote to Association business? _____

3. List current/past CCMD HOA experience (include year(s) of service):

4. List other relevant previous experience:

5. List other civil, special-interest committee or group involvement:

ASSOCIATION ISSUES:

6. I want to be a member of the Board of Directors because:

7. I feel I would make an effective Board member because:

8. I would like to see the Board of Directors resolve the following issues:

I acknowledge that I intend to run for a seat on the Board of Directors and, if elected, that I will accept those responsibilities as described in the Bylaws.

Signature: _____ Date: _____

Please return your completed Board of Directors Application form to any member of the Nominating Committee or to the Association Manager at the CCMD Community Center.