

SUN VALLEY ELKHORN ASSOCIATION Board of Directors Application

Name:					
	Ownership:				
	nent Residence (if other than above):				
Emaii A	Address:		Telephone:		
1.	I reside in Elkhorn/Sun Valley: Full-Time	le in Elkhorn/Sun Valley: Full-Time or Part-Time If part-time, please indicate # of months p			
2.	I own a: Single Family Home	Vacant Lot	Vacant LotCondominium/Townhome		
3.	I have the time to prepare for and attend four	r to six Board meetings per year	r: Yes	No	
4.	I have the time to participate in four to six co	eve the time to participate in four to six committee meetings per year:		No	
5.	Please indicate number of years past experience with (and explain if needed): For Profits or Not-For-Profits Homeowner Association Board Other Volunteer Work Homeowner Association Committee				
6.	Please explain in more detail your past experience as noted above and how it may be applicable to the Elkhorn Association.				
7.	What prompted you to apply for a Board position, why would you like to serve?				
8.	Finances (budgets, capit				
9.	Based on your knowledge of current SVEA issues, which area(s) do you feel you would add the most benefit to the E community and why?				
	Date:	Signature:			

Please complete this application, attach your photograph and a short (not to exceed 350 words) biography and return via email to the Association office svea@elkhorninsunvalley.com. Your information, as provided, will be included in the Annual Meeting Mailing to all SVEA Owners.