



FRANKFORT
PUBLIC LIBRARY DISTRICT
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LIBRARY TRUSTEE APPLICATION FOR APPOINTMENT

Name _____

Home Address _____

Phone _____

Email _____

Occupation/Profession _____

Business Name (If applicable) _____

Business Address _____

I have been a resident of the Frankfort Public Library District since _____

Are you presently a registered voter? Yes / No

Are you presently an employee of a municipality or government entity? Yes / No

Are you presently a Frankfort Public Library District cardholder? Yes / No

Are you able to attend a 7:00 PM monthly meeting, typically the 4th Thursday of the month?

Yes / No

1. Please describe any qualifications (work experience, education, volunteer experience, skills/training) that you feel would provide positive input to the work of the Library Board.

2. Please describe any former or current public service activities and accomplishments in the community (school groups, service clubs, other boards or commissions).

3. Please explain why you are interested in becoming a Library Trustee.

4. Please discuss briefly the goals and directions that should be important to this Board.

5. One thing you think the Library currently does very well:

6. One thing that could be done to make Library service even better is:

7. Please provide two references, including Name, Phone Number

Reference 1

Name:

Phone:

Email:

Reference 2

Name:

Phone:

Email:

8. Please attach a copy of your Driver's License, State ID, or other ID to your application.

Signature

Date

Return completed application to the Library or mail to:

Frankfort Library Board of Trustees
c/o, Amanda Kowalcze
Frankfort Public Library District
21119 S. Pfeiffer Rd.
Frankfort, IL 60423

Applications may also be emailed to: director@frankfortlibrary.org