

## **Rossland Public Library Trustee Application**

The information you provide to the Rossland Public Library will be used only by authorized staff and Library Board members in considering your application. Your application will be kept on file for one year from the date appointments are made or for the term of your appointment, whichever is applicable.

Date:	
First name:	Last name:
Street Address:	
Mailing Address:	
City:	Postal code:
E-mail:	Last name:  t Address:  g Address:  Postal code:  Cell#:  lo you want to join the Rossland Public Library board:  ant experience  ob experience:
Why do you want to join the Rosslar	nd Public Library board:
Relevant experience	
• Job experience:	
Board experience:	
Volunteering with other organization	zations:

Please submit this form to: director@rossland.bclibrary.ca

For more information contact: director@rossland.bclibrary.ca

Thank you for your interest in joining the Rossland Public Library Board of Trustees.