

PERSONAL DATA SHEET / DISTRICT DIRECTOR ELECTION

Mr. / Mrs. / Ms. _____ (Date of Birth) _____
(circle one) (Name of Director - PLEASE PRINT)

(Complete mailing address)

County _____ Email Address _____

(Area code) (Cell phone) (Area code) (Home phone)

_____ Yes _____ No Do you reside in a county all or any part of which is in the district and own agricultural land in the zone that you are to represent?

_____ Yes _____ No Are you actively engaged in the business of farming or animal husbandry?

_____ Yes _____ No Are you a District Cooperator?

Professional or business interests, if any, other than farming or ranching:

___ Lawyer ___ Doctor ___ Dentist ___ Engineer (kind) _____

___ Teacher ___ Preacher ___ Banker ___ Other _____

List membership and offices in local, state, or national organizations, agencies, etc.

Previously held:

Presently held:

Date

Signature of Director

Name of Soil and Water Conservation District

District #

Subdivision #