



Tri-County Telephone Association, Inc.
Board of Director Application

(Return by 5pm, January 18, 2019 TCT Business Office or Solutions Centers)

PERSONAL INFORMATION

Name:
Address:
City, State, Zip:
Contact Number:
TCT Membership Number:

Are you related to any current TCT employee or board member?

YES No

If yes, how:

Email Address:

What district are you applying for?

- Dist. 1 Dist. 2 Dist. 3 Dist. 4 Dist. 5 Dist. At-Large - East Dist. At-Large - West

EDUCATION

High School:
College: Major:
Advanced Degree(s):
Certifications(s):

EMPLOYMENT

Current Employer: Supervisor:

QUALIFICATIONS

Previous Boards/Groups:

Explain why you want to be a TCT Board Member (attach additional sheet if needed):

[Blank lines for explanation]

BUSINESS REFERENCES

Name: Contact #:
Name: Contact #:
Name: Contact #:

PERSONAL REFERENCES

Name: Contact #:
Name: Contact #:
Name: Contact #:

Signature: Date:

RETURN TO: TCT, Attn: Nominating Committee, 1568 S 1000 Rd, Council Grove, KS 66846
MUST BE RECEIVED BY 5PM, JANUARY 18, 2019