

**Request for Consideration Questionnaire for Taylor County
Recreation Advisory Board (TCRAB)**

Name: _____

Address: _____

Phone: Home: _____ Work: _____ Fax: _____

Email : _____

Please answer the following questions (use additional pages if necessary)

- | | | |
|--|-----|----|
| 1. Are you 18 years old or older? | Yes | No |
| 2. Are you a resident of Taylor County? | Yes | No |
| 3. Are you a registered voter in Taylor County ? | Yes | No |
| 4. Are you willing to spend up to eight hour per month for meetings and workshops? | Yes | No |
| 5. Are you willing to attend all Board Meetings (emergencies excluded)? | Yes | No |

Education:

High School Graduate?

Name of School: _____

Address: _____

Post-Secondary Education:

Name of School: _____

Address: _____

Technical Training:

Name of School: _____

Address: _____

Certificates or Licenses Held:

Please List: _____

College Courses or Graduate:

Name: _____

Address: _____

6. Do you or any family member have any affiliation with any business or company that has a vendor relationship with the Taylor County BCC or any other contractual relationship with the Taylor County Board of County Commissioners ?

Yes

No

If Yes explain:

7. Please list Board/Business/Volunteer/Work Experience:

8. Why do you wish to serve on the Taylor County Recreation Advisory Board ?

9. Have you ever been charged with a misdemeanor or felony in any state or federal court? If yes, please explain in detail: Yes No

10. The Taylor County Recreation Advisory Board will have representatives of all sports played at the Taylor County Sports Complex. Please indicate which sport you would like to represent from the following choices in ranking order; first choice, second choice and third choice and list your experience in each sport.

Soccer _____

Football _____

Baseball _____

Softball _____

Basketball _____

Tennis _____

Users of the Trail _____
