

Referred By _____ Date Received _____ Date Reviewed _____



Lakeside Chautauqua
236 Walnut Avenue
Lakeside, Ohio 43440
(419) 798-4461
www.lakesideohio.com

Lakeside Association Board of Directors Application

Contact Information

Name _____

Home Address _____ City _____

State _____ Zip Code _____ Phone _____

Email _____ Cell _____

Lakeside Address _____ Phone _____

Spouse's Name _____

Lakeside Chautauqua Information

Current property owner? Yes _____ No _____ # of years you have owned property _____

Previous property owner? Yes _____ No _____ # of years you owned property _____

Summer resident _____ Year-round resident _____

I normally stay in Lakeside _____ days or _____ weeks per year.

I have been coming to Lakeside for _____ years.

Employment Background

Occupation _____ Title _____

Currently employed: Yes _____ No _____ Full-time _____ Part-time _____

Level of education completed: High School _____ Undergraduate Degree _____ Graduate Degree _____

Degree and year granted _____

Institution, city and state _____

Major _____

Religious affiliation/membership _____

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Volunteer Background

Boards or committees you have served on in your religious organization:

Active volunteer in the following organizations (specify organization and role):

Corporate or not-for-profit boards (specify position):

Elected or appointed positions on federal, state or city government:

Membership in service clubs, civic or professional organizations:

Lakeside Chautauqua Interests

What Lakeside Chautauqua activities do you participate in or attend regularly?

What activity or aspect of Lakeside Chautauqua is most important to you?

What activity or aspect of Lakeside Chautauqua do you believe is most in need of improvement?

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Identify specific management/leadership skills you would contribute as a board member.

Committee Preferences

Of the five standing committees of the board, please rank them in order from 1 to 7, with 1 being your first choice:

Finance _____

Enterprise _____

Programming _____

Municipal Services _____

Accommodations & Guest Services _____

Governance _____

Nominating _____

Do you contribute annually to the Lakeside Fund? Yes _____ No _____

Additional Materials

Please attach a current vita, and use additional pages as needed, including your thoughts regarding the important issues facing Lakeside Chautauqua and what the Lakeside Association Board of Directors could do to better serve its constituents.

Application Authorization

Signature _____ Date _____

*Please submit a hard copy of this application to:
Lakeside Chautauqua Administration Office, Attn: Lakeside Chautauqua
Board of Directors Nomination Committee, 236 Walnut Ave., Lakeside, Ohio 43440.*