## **Application for Board of Commissioners Membership**

| Name:   |
|---|
| Address:  |
| Phone Number:Email Address:   |
| Occupation and place of employment, if employed:  |
| Do you currently receive Housing Choice Voucher Assistance? Yes / No  |
| Previous experience (if any) with the HRA or serving on boards/commissions:                                     |
|   |
| Please indicate any of the following knowledge that you have and briefly describe your experience in that area. |
| Disability Issues:  |
| Experience with Homelessness:   |
| Cultural Competency and Awareness:  |
| Property Management or Construction:  |

| Advocacy for people in poverty:  |
|--|
| Financial Management:  |
| Other areas of experience or expertise you would bring to the HRA?   |
| What interests you most about the HRA and being on our Board?  |
| Do you believe that you could fairly represent the interests of ALL HRA tenants and participants? Why?   |
| You are welcome to attach a resume or other information that will help us know you better.   |
| Please email this application to <a href="mailto:dlee@claycohra.com">dlee@claycohra.com</a> or mail/drop off at Clay County HRA, PO Box 99, 116 Center Ave E, Dilworth, MN 56529 |
| Thank you for your interest in serving the HRA!  |