



# Golden Valley Fire Department

749 S Egar Road • Golden Valley, AZ 86413

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Website: [www.goldenvalleyfire.org](http://www.goldenvalleyfire.org)

Email: [gafd@goldenvalleyfire.org](mailto:gafd@goldenvalleyfire.org)

## Board Member Application

### APPLICANT INFORMATION

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_ *City State ZIP Code*

Phone: ( ) \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Are you a resident within the Golden Valley Fire District? Yes  No  If yes, how long? \_\_\_\_\_

Are you a registered voter? Yes  No

Are you currently employed? Yes  No  If yes, profession? \_\_\_\_\_

Are you retired? Yes  No

### SUPPLEMENTAL QUESTIONS

1. Briefly state your basic reasons for wishing to serve on the Fire Board and any specific areas or issues that you would like to address?
2. If you were selected as the interim Board Member would you be able to commit to the monthly regular board meetings, special meetings and check signing duties?
3. Please describe your past experiences with boards of directors, local government, and special taxing districts.
4. By serving as a board member will this result in a conflict of interest for you, including but not limited to friends and relatives who are employees of GVFD?
5. What special or unique qualities or qualifications that you possess, will enhance the Board and its ability to serve our community?

**ADDITIONAL INFORMATION**

*Please add any additional information that you would like the Board to know about you.*

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**DISCLAIMER and SIGNATURE**

*I certify that my answers are true and complete to the best of my knowledge. I certify that I have no hidden agenda for applying for the Golden Valley Fire District Governing Board.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_