



LBID Board Application

Date of Application: _____

Name: _____

Signed: _____

Address: _____

e-mail address: _____

City & Zip Code: _____

Cellphone: _____

Other phone: _____

1. Are you a resident of the City of Livingston? _____

2. Are you a registered voter? _____

3. Will you be at least 18 years of age at the time of the appointment? _____

4. What business or building do you own in the District and why are you interested in this appointment? _____

5. Describe any background, experience and interests that you have which may assist you in performing the responsibilities of this appointment:

A. Occupation: _____

B. Education: _____

C. Experience: _____

(please attach a detailed resume if desired)

6. Have you previously served on any boards or governmental positions? _____

7. Are you currently serving on any Community Boards? _____

A. If yes, please describe those boards. _____

8. Current Employer? _____

9. Are you available for night meetings? _____

10. Are you available for daytime meetings? _____

11. Do you foresee any potential conflicts of interest that you might have in executing the duties of this appointed office? _____

12. If conflict of interest arose for you, how would you deal with it as an appointed member of this board? _____

Return completed applications to LBID Executive Director Kris King at info@downtownlivingston.org or mail to: PO Box 284, Livingston, MT 59047