

APPLICATION FOR CITIZEN APPOINTMENT
TO CALAVERAS PUBLIC UTILITY DISTRICT
BOARD OF DIRECTORS

Name: _____
Mailing address: _____
Physical address: _____
Home Phone: _____ Work Phone: _____
Email address: _____

Name of Board for which application is being made:

Please state briefly your previous experience/background which you feel will be of benefit to your serving in this specific Board:

State briefly your reason for wanting to serve on this Board:

Additional information you would like to submit/attach:

Signature _____ Date _____

Printed Name _____

Return to: Calaveras Public Utility District
P.O. Box 666
San Andreas, CA 95249
Email: info@cpud.org
Phone: (209) 754-9442 Fax: (209) 754-9432