CANDIDATE GENERAL INFORMATION

Full Name:
Address:
City/Village:
Zip Code:
Contact Information
E-mail Address:
Home Telephone:
Cell Phone:
Are you a registered voter? Yes No
BACKGROUND
Years lived in the Rochester Public Library District:
Employment
Current Occupation:
Years:
Current Employer/Address:
Previous Occupation:
Years:
Previous Employer/Address:

Education	
High School:	
Undergraduate College:	
Degree/Major:	
Graduate College:	
Degree/Major:	
Continuing education classes:	
COMMUNITY EXPERIENCE	
Include offices held, previous campaigns (even if unsuccessful) appointments library, municipal, park, school or other boards or committees, other political activities; dates:	s to
Civic and/or community activities; dates; leadership positions held:	
Military service and honors:	

QUESTIONS

Please	answer the following questions in no more than 150 words per question.
1.	What do you feel are the 3 greatest strengths of the Library District?
2.	What do you feel are the 3 greatest challenges facing the Library District today?
3.	Why are you seeking to fill this Library Trustee vacancy?
4.	Which of your skills and abilities will help you most as a Library Trustee?
	Do you plan to run for election as Library Trustee in the next Consolidated Election?
	Are you currently or have you in the past been employed by the Rochester Public Library? If so, please list position(s) and date(s) of employment.
	To the best of your knowledge, do you have any reletive(s) currently or previously employed by the Rochester Public Library? If so, please list name(s), position(s) and dates of employment.