



TRUSTEE ELECTION - 2021

Application and Petition for Trustee of the Board

ELECTION DATE AND TIME:
December 8 (9 a.m.-9 p.m.)

TERM OF SERVICE:
2022-2024

"A resident of the Service Area who wishes to become a Trustee must be eighteen (18) years of age at the time of the Annual Meeting, shall possess a Library card for at least one hundred eighty (180) days prior to the election, shall be in good standing, and may not be an employee of the Library or within the immediate family of an employee."

*NEW CITY LIBRARY BYLAWS
Article IV, Section 3(a)*

Instructions: Please fill in ALL fields; otherwise, the Application is INVALID.

To run for election for *Trustee of the Board of the New City Library*, please submit the following four (4) required items to the *Administration Office* in person, mail, email, or fax by 4:45 p.m. on October 13, 2021:

1. This completed form.
2. A personal *Statement of Interest* informing the Board why you want to be a *Trustee* and providing information about yourself.
3. Photo identification (*Driver's License, Identity Card, or Passport*).
4. Proof of residence (a recent utility bill—cable, water, or telephone).

Name: _____

Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Telephone: _____ **Email Address:** _____

Signature: _____ **Date:** _____

(PLEASE TURN PAGE OVER TO COMPLETE THE APPLICATION)

(Revised 08/11/21-KC)

This form must be signed by not less than 20 eligible voters. An eligible voter is any resident of the Library Service Area who is a duly registered voter as determined by the Board of Elections.

#	Print Name	Address	Signature
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I submit the above signatures for eligibility verification.

Signature: _____ **Date:** _____

If you would like to meet the Board members, please call (845) 634-4997 Ext. 112.

New City Library • 220 North Main Street • New City, New York 10956
 Telephone: (845) 634-4997 • Fax: (845) 634-0173 • Board Email: nclboard@newcitylibrary.org
www.newcitylibrary.org

THIS BOX IS FOR LIBRARY USE ONLY:

Date Received: _____ Received By: _____ Photo ID Received: _____ Proof of Residency Received: _____