

CITY OF GUTTENBERG
APPLICATION FORM FOR LIBRARY BOARD OF TRUSTEES
Please Return To: Guttenberg Public Library, c/o Director, PO Box 130
Guttenberg, IA 52052
Email: guttlib@alpinecom.net Phone/fax: (563) 252-3108

Name: _____

Address: _____

Phone Number: _____ **E-mail Address:** _____

Business Phone: _____ **Cell Phone:** _____

Please list your place of employment/or activities such as hobbies, volunteer work, etc. that you feel may qualify you for this appointment (continue on back if needed):

Please describe why you are interested in serving on the Library Board of Trustees (continue on back if needed):

What contributions do you feel you can make (continue on back if needed)?

I certify that there is nothing that would prohibit me from serving on Guttenberg Public Library Board of Trustees.

Print Name: _____

Signature: _____ **Date:** _____