

JEFFERSON COUNTY FAIR AUTHORITY

Director's Application Form

Name: _____ years lived in Jefferson County

Address: _____

Phone Number: _____ Profession: _____

E-mail Address: _____ Date: _____

1. Are you available to attend monthly meetings on the first Wednesday of each month at 7:00 p.m. in Brookville, work sessions on last Wednesday of each month at 6:30 pm, special meetings on occasion, and fair sponsored events such as Truck Pull and the Fair in July?

_____ Yes _____ No

2. Do you understand the role of the Jefferson County Fair Authority? _____ Yes _____ No

3. List community organizations in which you are active:

4. Briefly describe what qualifications and attributes you would bring to the Authority:

5. Do you have work experience or education in the field of agriculture? If yes, please describe:

6. Do you have experience as a volunteer or exhibitor at the Jefferson County Fair? _____ Yes _____ No

If yes please explain _____

7. What are the major issues you feel the Jefferson County Fair Authority needs to address? (Use the back of this sheet or attach a separate sheet if necessary):

All applications will be reviewed by the Nominating Committee and recommendations will be forwarded to the Jefferson County Commissioners for appointment. All appointees will assume 5-year terms as set by the commissioners, and will begin service on the first Monday of January in that year. Any decisions of the commissioners will be final. Thank you for your interest in the Jefferson County Fair Authority.

Please return your completed application form as soon as possible, but not later than November 1, to: Jefferson County Fair, Attention Nominating Committee, PO Box 213, Brockway, PA 15824 Email to jeffcofairpa@gmail.com

Today's Date _____

Signature _____