Consent to be Nominated

Please provide information about your qualifications and candidacy, and return this form to the local K-State Research and Extension office. Information from this form may be used in publicity about the upcoming election.

I agree to have my name submitted in nomination as a member of the local Extension council.

I am an eligible voter in this county.

If I am elected, I agree to serve on the Extension council.

I understand that members of the Extension council are responsible for working with agents to plan, prioritize, and implement a comprehensive educational program designed to meet the needs of individuals and target issues affecting communities.

County Election Only:
If elected to the council, I understand that I am eligible to be nominated to the Extension board, which meets monthly or more often to conduct council business.
_____ I am willing to serve on the board, if nominated.
_____ I prefer not to serve on the board.

County and District Nominees:
In the space below, please tell us a little about yourself: (occupation, involvement in Extension programs, community activities).

What are your experiences with adult and/or youth educational programs, including those provided by K-State Research and Extension?

What goals do you envision for Extension?

Name ___________________________________________ E-mail address ___________________________
Address __________________________________________________________________________________
City, State and Zip ________________________________________ Phone ___________________________

Return this form to the local office of K-State Research and Extension.