



The Lakes at Cedar Grove Neighborhood Association, Inc.  
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**CANDIDATE INFORMATION FORM**

NAME: \_\_\_\_\_ PHONE NO.: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

EDUCATION: \_\_\_\_\_

\_\_\_\_\_

EMAIL: \_\_\_\_\_

PERSONAL  
BACKGROUND: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

LAKES AT CEDAR GROVE AND/OR HOA EXPERIENCE: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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WHY ARE YOU A CANDIDATE FOR A BOARD POSITION? \_\_\_\_\_

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WHAT WILL BE YOUR PRIORITIES AND WHAT DO YOU HOPE TO ACCOMPLISH AS A BOARD MEMBER?

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**Attach a one page copy of your resume.**