



## TRUSTEE CANDIDATE ADVISORY COUNCIL

### APPLICATION FOR THE BOARD OF TRUSTEES OF THE MINNESOTA STATE COLLEGES AND UNIVERSITIES

This application is available on the council's Web site: [www.tcac.leg.mn](http://www.tcac.leg.mn)

**Please send application to:**

Trustee Candidate Advisory Council  
c/o Legislative Coordinating Commission  
72 State Office Building  
100 Rev. Dr. Martin Luther King Jr., Blvd.  
St. Paul, MN 55155  
(651) 296-9002  
(651) 297-3697 FAX

**Under the Minnesota Data Privacy Act, Minnesota Statutes Section 13.43, Subdivision 3, parts of this application are public information once a candidate becomes a finalist. "Finalist" is defined in statute as a person that has been selected for an interview. The application is divided so that the first portion is public information, including: name, address, employment record, governing board experience, and education. The second portion of the application includes references and essay questions. Reference information remains private information. Answers to essay questions are private unless the applicant waives his or her right and releases that information.**

**PUBLIC INFORMATION SECTION**

There are four open positions on the Board of Trustees; two at-large, one from the 2nd Congressional District, and one from the 6th Congressional District. Please check the trustee position(s) for which you are applying.

- \_\_\_\_\_ At-Large (two positions)
- \_\_\_\_\_ 2nd U.S. Congressional District (one position)
- \_\_\_\_\_ 6th U.S. Congressional District (one position)

**Personal Information**

Name: \_\_\_\_\_  
(First) (Middle/Maiden-Optional) (Last)

Address: \_\_\_\_\_  
(Street) (Apt. #)

\_\_\_\_\_ (City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip) \_\_\_\_\_ (Congressional District)

*\* Phone, fax and email contact information is made public only with the consent of the applicant. Checking the boxes allows release of that information if the applicant is selected as a finalist.*

Phone Number\*: (H) \_\_\_\_\_ (W) \_\_\_\_\_ Check here to release phone information

Fax Number\*: \_\_\_\_\_ Check here to release fax information

Email Address\*: \_\_\_\_\_ Check here to release email information

**EMPLOYMENT HISTORY**

Past occupation or experience (voluntary or paid), including dates and person to whom you reported. Please limit to last three positions and list most current information first.

Employer: \_\_\_\_\_ Voluntary or Paid: \_\_\_\_\_

Address: \_\_\_\_\_

Position: \_\_\_\_\_

From (Month/Year): \_\_\_\_\_ To (Month/Year): \_\_\_\_\_

Supervisor: \_\_\_\_\_ Phone: \_\_\_\_\_

Employer: \_\_\_\_\_ Voluntary or Paid: \_\_\_\_\_

Address: \_\_\_\_\_

Position: \_\_\_\_\_

From (Month/Year): \_\_\_\_\_ To (Month/Year): \_\_\_\_\_

Supervisor: \_\_\_\_\_ Phone: \_\_\_\_\_

Employer: \_\_\_\_\_ Voluntary or Paid: \_\_\_\_\_

Address: \_\_\_\_\_

Position: \_\_\_\_\_

From (Month/Year): \_\_\_\_\_ To (Month/Year): \_\_\_\_\_

Supervisor: \_\_\_\_\_ Phone: \_\_\_\_\_

**GOVERNING BOARD EXPERIENCE**

Such as government, business, education, church, charities, non-profits, etc. Please limit to last four positions and list most current information first.

Organization: \_\_\_\_\_

Position: \_\_\_\_\_

From (Month/Year): \_\_\_\_\_ To (Month/Year): \_\_\_\_\_

Chair(s) during service: \_\_\_\_\_ Phone: \_\_\_\_\_

Executive Officer(s) during service: \_\_\_\_\_ Phone: \_\_\_\_\_

Organization: \_\_\_\_\_

Position: \_\_\_\_\_

From (Month/Year): \_\_\_\_\_ To (Month/Year): \_\_\_\_\_

Chair(s) during service: \_\_\_\_\_ Phone: \_\_\_\_\_

Executive Officer(s) during service: \_\_\_\_\_ Phone: \_\_\_\_\_

Organization: \_\_\_\_\_

Position: \_\_\_\_\_

From (Month/Year): \_\_\_\_\_ To (Month/Year): \_\_\_\_\_

Chair(s) during service: \_\_\_\_\_ Phone: \_\_\_\_\_

Executive Officer(s) during service: \_\_\_\_\_ Phone: \_\_\_\_\_

**GOVERNING BOARD EXPERIENCE (continued)**

Organization: \_\_\_\_\_

Position: \_\_\_\_\_

From (Month/Year): \_\_\_\_\_ To (Month/Year): \_\_\_\_\_

Chair(s) during service: \_\_\_\_\_ Phone: \_\_\_\_\_

Executive Officer(s) during service: \_\_\_\_\_ Phone: \_\_\_\_\_

**EDUCATION**

	Name & Location of School	Major Area of Study	Diploma/Degree Date Received
High School			
College/Post-secondary			
College/Post-secondary			
College/Post-secondary			

PLEASE PROVIDE US WITH THE FOLLOWING INFORMATION: How did you find out about this position? (Check all that apply)

Newspaper \_\_\_\_\_ Employer \_\_\_\_\_ Friend \_\_\_\_\_  
 Radio/TV \_\_\_\_\_ School \_\_\_\_\_ Web site \_\_\_\_\_  
 Newsletter \_\_\_\_\_ Organization \_\_\_\_\_ Other (specify) \_\_\_\_\_

**PRIVATE INFORMATION SECTION**

**NOTE: Please do not submit written endorsements, letters of recommendation, supporting documentation or additional material unless requested. Materials will not be forwarded to the council.**

**REFERENCES**

This information is private; it is used only by council members for purposes of contacting references. (The council may also talk to others, including supervisors and board colleagues, about your qualifications.)

Name: \_\_\_\_\_ Organization/Firm: \_\_\_\_\_

Relationship: \_\_\_\_\_ Phone:(W) \_\_\_\_\_ (H): \_\_\_\_\_

E-mail: \_\_\_\_\_

Name: \_\_\_\_\_ Organization/Firm: \_\_\_\_\_

Relationship: \_\_\_\_\_ Phone:(W) \_\_\_\_\_ (H): \_\_\_\_\_

E-mail: \_\_\_\_\_

Name: \_\_\_\_\_ Organization/Firm: \_\_\_\_\_

Relationship: \_\_\_\_\_ Phone:(W) \_\_\_\_\_ (H): \_\_\_\_\_

E-mail: \_\_\_\_\_

Name: \_\_\_\_\_ Organization/Firm: \_\_\_\_\_

Relationship: \_\_\_\_\_ Phone:(W) \_\_\_\_\_ (H): \_\_\_\_\_

E-mail: \_\_\_\_\_

**ESSAY QUESTIONS\***

Answers to essay questions remain private unless the applicant waives this right. Checking the box below allows the release of this information only if the applicant is selected as a finalist.

\* Check to release answers to essay questions

**Please answer the following questions, using no more than two additional pages:**

1. What has been your most important work or volunteer achievement? Please describe it briefly and indicate why it was important.
2. How do you characterize your style in group decision making? Give a specific example(s).
3. Having read the enclosed description of trustee selection criteria and responsibilities, please describe how your experience and qualifications would enable you to be a good trustee.
4. What are the most important issues confronting Minnesota State Colleges and Universities (MnSCU) and how would you contribute to solving them?
5. What is your understanding of conflict of interest that arises in connection with service on a governing board? What should a board member do when the possibility of a conflict of interest arises, with respect to yourself or a fellow board member?
6. What strategies and policies would you propose as a board member to broaden diversity of students and staff on MnSCU campuses?
7. Trustees have indicated that service on the board reasonably requires a commitment of at least 40 hours per month. The term of a trustee is six years. The Board of Trustees meets for two days each month. In addition to preparation for their meetings, there are numerous other campus activities that a trustee may be called on to attend or elect to attend. Are you prepared to make such a commitment? Can you think of any circumstances that might prevent you from serving for the full duration of your term?

I certify that all information in this application is factually correct, and do hereby consent to my nomination . By signing below, permission is granted to obtain information from all organizations and individuals mentioned in this application.

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)