

# DOWNTOWN SCHENECTADY IMPROVEMENT CORPORATION

## 2010 Board of Directors Self Nomination Form

Name \_\_\_\_\_

Business (if applicable) \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

### I am nominating myself as (please check one):

1. An owner of real property located within the DSAD \_\_\_\_\_
2. An agent of an owner of real property located within the DSAD \_\_\_\_\_

Property Owner's Name (please print) \_\_\_\_\_

Address of DSAD Property \_\_\_\_\_

I hereby authorize \_\_\_\_\_ to represent the property above as an independent and full voting member of the DSIC Board of Directors, should he/she be appointed by the Mayor of Schenectady and approved by the Schenectady City Council.

*If property is owned by an entity:* I verify that I am authorized to sign on behalf of the entity owner of this property. Representative Name (print) \_\_\_\_\_

Owner/Rep Signature \_\_\_\_\_ Date \_\_\_\_\_

3. A non-property owner \_\_\_\_\_

I agree to sign and adhere to a list of basic and individual board member responsibilities:  Y  N

### Signatures in Support of Nomination (add additional pages if necessary):

1. Name (print) \_\_\_\_\_

Signature \_\_\_\_\_

Business \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

3. Name (print) \_\_\_\_\_

Signature \_\_\_\_\_

Business \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

2. Name (print) \_\_\_\_\_

Signature \_\_\_\_\_

Business \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

4. Name (print) \_\_\_\_\_

Signature \_\_\_\_\_

Business \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

(over)

**2010 DSIC Board Self Nomination Form (cont'd):**

**5. Name (print)** \_\_\_\_\_  
Signature \_\_\_\_\_  
Business \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_

**6. Name (print)** \_\_\_\_\_  
Signature \_\_\_\_\_  
Business \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_

**7. Name (print)** \_\_\_\_\_  
Signature \_\_\_\_\_  
Business \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_

**8. Name (print)** \_\_\_\_\_  
Signature \_\_\_\_\_  
Business \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_

**9. Name (print)** \_\_\_\_\_  
Signature \_\_\_\_\_  
Business \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_

**10. Name (print)** \_\_\_\_\_  
Signature \_\_\_\_\_  
Business \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_

**11. Name (print)** \_\_\_\_\_  
Signature \_\_\_\_\_  
Business \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_

**12. Name (print)** \_\_\_\_\_  
Signature \_\_\_\_\_  
Business \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_

**13. Name (print)** \_\_\_\_\_  
Signature \_\_\_\_\_  
Business \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_

**14. Name (print)** \_\_\_\_\_  
Signature \_\_\_\_\_  
Business \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_

**15. Name (print)** \_\_\_\_\_  
Signature \_\_\_\_\_  
Business \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_

**Return this completed form along with**

- 1. Your resume; and**
- 2. A cover letter describing why you want to serve on the DSIC board; to:**

**DSIC Board Nominations, Attn: Jim Salengo, 143 State Street, Schenectady, NY 12305**

**DEADLINE: Wednesday, March 3, 2010, 5pm**