

PRE-QUALIFICATION AND CONSENT FORM CANDIDATE FOR LRWA BOARD OF DIRECTORS

LRWA District _____

Name				
Mailing Address				
City	State	Zip		
Email		Phone		
LRWA Member Water/Wastewater Uti	ity Name			
Current resident of Louisiana		Yes	No	
What LRWA District are you a resident of	of?			
Are you a customer of this LRWA Member Utility listed above?		Yes	No	
Are you an LDH certified operator?		Yes	No	
If yes, what LDH Water/Wastewater certifications do you hold				
Are you a member of the board of directors or governing body of the utility listed above?			Yes	No
Are you a full-time employee of this LRWA Member Utility listed above?		Yes	No	
Facility Name				
Years of Service				
Title				
Number of years in current position				
See page 4 of the LRWA By-law VII (Sect	on 4 Qualification to Serve) on	the LRWA website (https://lrw	va.org/)	
I certify that I have read By-laws VII se	ection 4 of the current LRWA	By-laws and am qualified t	to serve under	the
terms and conditions thereof. I give my	/ consent to have my name p	olaced on the official LRWA	A ballot for the	
position indicated above and agree to				
policies. My utility system authority is a	aware that I am seeking this	office and have submitted t	the signature o	of the
Governing Authority.				
Governing Authority Signature	Date			
Candidate Signature	Date			

QUALIFYING is APRIL 1-30, 2022 for the 2022 board qualifying form.

This form can be faxed to the LRWA office at 337-738-5620 or emailed lrwa@lrwa.org.