

Council Member Appointment Application

To submit your application please email info@icdd.idaho.gov, fax (208) 334-3417 or mail completed forms to 700 W. State St., Ste. 119, Boise, ID 83702. Call (208) 334-2178 if you need help filling this form out. You must also fill out a Governor's Application.

Personal Information

Legal Name You go by

Street Address City Zip Code

Phone Number Email address

I identify as: Male Female Other

If Other, please describe:

Preferred pronouns: She/Her/Hers He/Him/His They/Their

I am:

Caucasian Asian

Hispanic Native American

African American Other (please explain)

Application Details

I am applying for: First Time Appointment Reappointment

I am applying as:

A person with a developmental disability

A parent of a child with a developmental disability

An immediate relative, parent, or guardian of a person with a developmental disability who is or was in an Institution

A person with a developmental disability who currently is or was in an Institution

A local non-governmental agency representative

	A private nonprofit organization representative				
	The Protection and Advocacy organization representative				
	An University Center for Excellence in Developmental Disability representative				
	A state agency representative, agency name:				
	Other (please explain):				
Wha	What qualifies you for the position you are applying for?				
What are your specific disability-related interests or concerns?					
What have you done to improve your concern?					
As a Council member, in what ways will you help improve the lives of Idahoans with intellectual and developmental disabilities?					
My commitment level for working on my disability related issues/concerns is:					
	Extremely High	High	Average	Low	
My commitment level for working on other issues affecting people with developmental disabilities is:					
	Extremely High	High	Average	Low	
My comfort level for speaking in and before groups and making presentations is:					
	Extremely High	High	Average	Low	
My comfort level for presenting information to state and local elected officials is:					
	Extremely High	High	Average	Low	

Do you have commitments or conflicts that might prevent you from attending quarterly Council meetings in Boise? Yes No

If yes, please explain:

Provide any other information that will help us to know you better.

References

Email

Relationship

Please list three (3) non-family references and their relationship to you. At least two of these references should be professional (employer, child's teacher, civic leader, elected

official, clergy, etc.). Reference 1: Name Phone **Email** Relationship Reference 2: Name Phone **Email** Relationship Reference 3: Name Phone