## Sikh Society of Minnesota

9000 W Bloomington Freeway, Bloomington, MN 55433 www.mnsikhs.com; Phone: 952-888-2705

## **Advisory Committee Application Form**

#### Overview.

The Sikh Society of Minnesota's (SSM) governs the overall execution of the organization's mission. The Advisory Committee is created as a standing committee of the SSM. The purpose of this committee is to:

- Monitor the SSM's Board of Directors compliance with the Bylaws.
- Oversee the election process.
- Review membership applications.
- Participate in the annual financial audit of the SSM.

The term of membership to this committee shall be for one-year beginning February 1 until January 31 of the following calendar year. An Advisory Committee Member may not serve as a director concurrently. A member may be annually reelected to serve a maximum of five consecutive years.

#### To apply:

• Submit the Advisory Committee Application form (starts on page 2 of this document), as well as your photograph and resume to the Advisory Committee at: <a href="mailto:ssmadvisorycommittee@mnsikhs.com">ssmadvisorycommittee@mnsikhs.com</a>.

Please indicate "New Advisory Committee Member Application" in the subject line.

• Copies of your application will be provided electronically to the voting members and will aid in their understanding of how you would like to contribute to SSM. Upon request, hard copies will be available at the Gurdwara library. Personal details, such as address, and contact information will not be distributed.

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## **SSM Advisory Committee Application Form**

- Applications must be received by 11:59 pm on September 30. Late submissions may not be considered.
- Sign and ask TWO sponsors to nominate you on your behalf. INCOMPLETE FORMS
  WILL NOT BE PROCESSED.
- Turn in your form and corresponding materials to the Advisory Committee at ssmadvisorycommittee@mnsikhs.com.

Section 1. Candidate General I	nformation
First name:	Last name:
Email	Phone number:
Address:	

By Signing Below, You Make the Following Representations and Certifications

#### I hereby certify that:

- I have read and understand the SSM Bylaws dated July 2000 and will meet the requirements.
- I have read and understand the SSM Code of Conduct and will abide by them.
- I am a member of SSM in good standing.
- The information given in this application form is true and correct to the best of my knowledge, and I authorize the SSM to investigate all statements or other information in this form.
- I am eligible to serve on the Advisory Committee pursuant to Section 4.5 of the SSM Bylaws.

Date: Candidate Signature:

**Section 2. Sponsor Information** (Two sponsors are required)

Sponsors **must** provide a brief statement describing why you are nominating this individual. Include more information about how the nominee will serve the community, information about his or her personal qualities and background.

#### Sponsor 1

Full Name:	Email:	

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Phone number:		Number of years you've known individual:			
Address:					
Briefly describe why you are nominating this individual.					
Date:		Sponsor 1 Signature:			
Sponsor 2					
Full Name:		Email:			
Phone number:		Number of years you've known individual:			
Address:					
Briefly describe why you are nominating this individual.					
Date:		Sponsor 2 Signature:			

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# **Section 3. Candidate Short Answers** This information will be provided to the voting members on the Simply Voting website and will aid in their understanding of how you would like to contribute to SSM. Upon request, hard copies will be available at the Gurdwara library. 1. Briefly describe why you are interested in a position on the Advisory Committee. 2. Briefly describe the skills and expertise you bring to SSM that you believe will allow you to advance the purpose of the Advisory Committee (E.g., financial audit or oversight experience). 3. Briefly describe how you have served the Sikh community.

----- End of Application -----

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Section 4. (FOR OFFICIAL USE ONLY) Advisory Committee Verification:					
Received by:	Date:				
Approved by:	Date:				
Approver Signature:					