

William Hagood
President – Board of Health



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BOARD OF HEALTH MEMBER APPOINTMENT INFORMATION For March 2011 Vacancy

The Trumbull County Health District Advisory Council and the Trumbull County Board of Health are seeking interested parties who want to apply for appointment to a 5-year term on the Trumbull County Board of Health.

Health District Advisory Council requires all interested parties to complete a Nomination Petition for Appointment to the Trumbull County Board of Health, a copy of which can be obtained from the Trumbull County Health Department office or on their website www.tcbh.org.

In order to qualify for appointment to this Board of Health vacancy, a Candidate must be a U.S. Citizen and an elector (registered voter) residing within the Health District, and must complete and file a nominating petition on a form prescribed by the Health District Advisory Council. Residents of the cities of Warren, Niles and Girard are ineligible.

Applicants should submit a letter of interest, resume and nominating petition to Trumbull County District Advisory Council, c/o Johnna Ben, Trumbull County Health Department, 176 Chestnut Ave., N.E., Warren, Ohio 44483, by 4:00 P.M., Tuesday, February 22, 2011.

TRUMBULL COUNTY HEALTH ADVISORY BOARD

NOMINATION PETITION FOR APPOINTMENT

TO

TRUMBULL COUNTY HEALTH BOARD

Name: _____ Phone: _____

Address: _____

City/State/Zip: _____

Voting Precinct: _____

Occupation: _____

Education: (Circle Highest Level Completed)

High School 9 10 11 12 College 1 2 3 4

College Degree _____

Post Grad Degree _____

Related Skills, Activities, Experience in Health Administration or Government:

Date: _____ Signature _____

We the undersigned members of the Trumbull County Health Advisory Board, hereby nominate the above candidate for appointment to the Trumbull County Health Board for the Full-Term commencing on _____.

Signature	Political Subdivision	Date

***Must be signed by 4 Voting Members of the Health District Advisory Council (i.e. Chairman of the Board of Township Trustees or the Mayor of the City or Village within the Health District) & submitted with letter of interest & resume.**