



Neosho County, Kansas

**APPLICATION FORM FOR APPOINTMENT TO
NEOSHO MEMORIAL REGIONAL MEDICAL CENTER BOARD**

APPLICATION DATE: ____ / ____ / ____
MM DDD YYYY

APPLICANT NAME: _____

HOME ADDRESS: _____

BUSINESS ADDRESS: _____

AREA OF EXPERTISE AND/OR EDUCATION: _____

*****Please attach your resume to this application*****

NMRMC Board of Trustee Requirements

- Trustees are appointed for a four (4) year term.
- Trustees may not hold state, county, or city elected office.
- A board member who misses two (2) consecutive meetings without due cause shall be reported to the County Commissioners.
- Current meeting schedule is the third Thursday of every month, starting at noon.
- Trustees are required to provide an annual conflict of interest statement and attend board education.

APPLICATION MUST BE RECEIVED BY 4:30 pm MARCH 13, 2026

SIGNATURE: _____

MAIL OR E-MAIL THIS FORM TO

Chasity Foreaker, Neosho County Clerk | PO Box 138 | Erie KS 66733

or email: nococlerk@neoshocountyks.org