

Regent Candidate Advisory Council

APPLICATION FOR THE UNIVERSITY OF MINNESOTA BOARD OF REGENTS

Applications must be received by December 4, 2020.

Under the Minnesota Government Data Practices Act (Minnesota Statutes, section 13.601) parts of this application are public information and other parts are private information.

What type of information is considered public information:

- name
- city of residence
- education and training
- employment history
- volunteer work
- awards and honors
- prior government service
- veteran status

What type of information is considered private information:

- Answers to the essay questions are private data unless you agree to make them public by checking the box on page 4.
- The written information provided by your references.

The Council is collecting this private data to assist it in evaluating your application for membership on the Board of Regents. You are not required to provide private data, but the lack of this data may affect the ability of the Council to evaluate your application. Although the answers to the essay questions and the parts of this application containing information about references is private data, the law does not allow the Council to close a meeting to discuss this information. If the Council needs to discuss this information at a public meeting, it will attempt to take reasonable steps to protect the privacy of the information.

If you are elected to the Board of Regents, the following additional items on this application will become public: residential address, and either a telephone number or electronic mail address (or both if you request).

Position Sought

There are four open positions on the Board of Regents; one from each of the following Minnesota Congressional District - 1st, 4th, 6th and 7th. Please check the regent position for which you are applying.

Find your district at: <http://www.gis.leg.mn/iMaps/districts/>

- 1st Congressional District (one position – six year term)
- 4th Congressional District (one position – six year term)
- 6th Congressional District (one position – six year term)
- 7th Congressional District (one position – six year term)

Personal Information

Name:

First *Last* *Middle/Maiden-Optional*

Address:

Street Address *Apartment/Unit #*

City *State* *Zip Code*

Checking the boxes below allows release of that information now. Please note that the information provided below may be made available to members of the legislature and their staff for official purposes only.

* Phone Number: _____ I agree to make this number public now.

* E-mail Address: _____ I agree to make this address public now.

Employment History

Please provide employment history (voluntary, paid or self-employment) for the past ten years or your last three positions (whichever is greater, if applicable) and list most current information first. Please use a separate piece of paper if necessary.

Employer: _____ Voluntary/ Paid /
Self-Employment: _____

Address: _____

Position: _____

From (Month/Year): _____ To (Month/Year): _____

Employer: _____ Voluntary/ Paid/
Self-Employment: _____

Address: _____

Position: _____

From (Month/Year): _____ To (Month/Year): _____

Employer: _____ Voluntary/Paid/
Self-Employment: _____

Address: _____

Position: _____

From (Month/Year): _____ To (Month/Year): _____

Governing Board Experience

Governing board experience can be obtained by being on the following types of boards: government, business, education, religious organization, charities, non-profits, etc. Responses should be limited to your last four positions; listing most current information first. If you would like to submit additional governing board information, please provide it on a separate piece of paper.

Organization: _____

Position(s): _____

From (Month/Year): _____ To (Month/Year): _____

Organization: _____

Position(s): _____

From (Month/Year): _____ To (Month/Year): _____

Organization: _____

Position(s): _____

From (Month/Year): _____ To (Month/Year): _____

Organization: _____

Position(s): _____

From (Month/Year): _____ To (Month/Year): _____

Education

College/Post-Secondary: _____ Location: _____

Major Area of Study: _____ Degree: _____

College/Post-Secondary: _____ Location: _____

Major Area of Study: _____ Degree: _____

College/Post-Secondary: _____ Location: _____

Major Area of Study: _____ Degree: _____

References – THIS INFORMATION IS PRIVATE

The reference information provided as part of the application will be used by Council members / legislative staff members for the limited purpose of evaluating your application. By submitting this application, you consent to legislative staff contacting these individuals to obtain a written reference if you are selected to participate in the interview portion of this application process.

Full Name: _____ Relationship: _____

Organization: _____ Phone: _____

E-mail: _____

Full Name: _____ Relationship: _____

Organization: _____ Phone: _____

E-mail: _____

Full Name: _____ Relationship: _____

Organization: _____ Phone: _____

E-mail: _____

Full Name: _____ Relationship: _____

Organization: _____ Phone: _____

E-mail: _____

Essay Questions and Attestations

Answers to essay questions and attestations remain private unless the applicant permits the release of this information by checking the box below.

* I permit public release of my answers to essay questions

Please answer the following questions using no more than two additional pages.

Essay Questions:

1. What has been your most important work or volunteer achievement? Please describe it briefly and indicate how this expertise could benefit the priorities of the University of Minnesota.
2. How would others characterize your style in group decision making? Give specific examples of how you have been effective within a board or committee to influence decisions made by the group.
3. How would you address the issues of tuition, student debt, and up to three (3) additional important issues currently confronting the University of Minnesota?

Attestations:

<input type="checkbox"/> Yes	<input type="checkbox"/> No	I have read the Code of Conduct for Members of the Board of Regents and confirm that no personal or professional conflict of interest exists that would hinder my ability to serve in the capacity as a Regent (if elected).
<input type="checkbox"/> Yes	<input type="checkbox"/> No	I am aware that the amount of time a Regent must commit to perform required duties ranges from 20 to 40 hours per month and I confirm that I am able to commit such amount of time should I be elected to the position of Regent.
<input type="checkbox"/> Yes	<input type="checkbox"/> No	Is there any current or past event(s) that has occurred in my life which, if known, could negatively impact my effectiveness as a Regent (if elected)?

If you answer *(i) "No" to Attestations 1 or 2 or (ii) "Yes" to Attestation 3, please provide a short overview of the situation and include it with your essay responses.

Signature and Submittal Instructions

By submitting this application, I certify that all information in this application is factually correct, and do hereby consent to my nomination.

Signature: _____ Date: _____

Completed applications may be sent by e-mail to lcc@lcc.leg.mn, by fax to 651-297-3697, or by mail to the address listed below.

Regent Candidate Advisory Council
72 State Office Building
100 Rev. Dr. Martin Luther King Jr., Blvd.
St. Paul, MN 55155

Note: Do not submit documents that have not been requested as part of the application process.