

NAME: Lynette Maas
 (First) (MI) (Last)

ADDRESS: 51425 Long Point Place HOME PHONE: 218/426-3226
McGregor, MN BUSINESS PHONE: —
55760 CELL PHONE: 218/295-2232

E-MAIL ADDRESS: lmaas4882@gmail.com

EMPLOYER: Retired OCCUPATION: Former School Administrator

EMPLOYER ADDRESS: —

1. Please state your reason for applying: After being retired for several years, I'm ready now to make a positive contribution (again) to community.
2. What has been your past involvement with Public Health Services, Social Services, Financial Services and other civic and community activities: While superintendent at McGregor, I was involved with various committees that included H+HS.
3. Are you able to attend meetings during the day? Yes No
 Currently this committee meets at 3:30 p.m. on the first Wednesday of each month.
4. Are you able to attend at least 10 meetings each year? Yes No
5. Would you be willing to serve a one-year or two-year term? Either
 One-year Two-year

Signature of Applicant: Lynette Maas Date: 11/30/16

PLEASE COMPLETE AND SUBMIT THIS APPLICATION TO:
 Aitkin County Health & Human Services
 Attention: Julie
 204 - 1st Street NW
 Aitkin, MN 56431

Questions? Call: 218-927-7200 or 1-800-328-3744

**MINNESOTA OPEN APPOINTMENT ACT
APPLICATION FOR SERVICE ON COUNTY/STATE AGENCY**

NAME OF AGENCY OR COMMITTEE YOU WISH TO SERVE ON:

Health + Human Services Advisory Committee

AITKIN COUNTY COMMISSIONER DISTRICT 4

Minnesota Statutes 15.0597, state that the application shall include a "statement that the nominee satisfies any legally prescribed qualifications and any other information the nominating person feels be helpful to the appointing authority." (May include employment, community service experience, or education that would be pertinent to this appointment)

I have lived in the Tamarack/McGregor areas for most of my life. Before my retirement, I served in education for 34 years, holding the positions of teacher, principal, and superintendent. For those roles, I earned several college degrees. My job experience includes small, rural districts and large suburban high schools. These positions also provided some experience in working with social services and law enforcement.

I, the undersigned, hereby state that I satisfy, to the best of my knowledge, all legally prescribed qualifications for the position sought.

Lynette Maas
Signature of Applicant

11/30/16
Date

If applicant is being nominated by another person or group, the above signature indicates consent to nomination.

Is this application submitted by appointing authority? Yes _____ No X

Is this application submitted at the suggestion of appointing authority? Yes _____ No X

**Please return application to the Aitkin County Administrator's office, located at
217 2nd Street NW - Room 130, Aitkin, MN 56431**

NAME OF APPLICANT: Lynette Maas

STREET ADDRESS OF APPLICANT:
51425 Long Point Place
McGregor, MN 55760

PHONE NUMBERS:
DAYS 218/232-2295
EVENINGS 218/426-3226

For Office Use Only

Date Appointed: _____

Date of Term Expiration: _____

Term #: _____