

OLMSTED COUNTY DFL SCREENING FORM

Please complete and bring to the interview with you.

Name _____ Phone # _____

Address _____ House District _____

City, Zip _____ E-mail _____

Position Seeking (Check all that apply):

Chair Associate Chair Secretary Treasurer

Affirmative Action Officer Communications Officer Director

State/1st Congressional District Central Committee Delegate

As a member of the Olmsted DFL Executive Committee, will you support all DFL-endorsed candidates? Yes No

Previous party positions held:

Other related activities:

Additional Comments:

If you are seeking a Director position, which of these committees will you join?
____ Communications ____ Events ____ Fundraising ____ Party Development
(Choose at least one)