

Northpointe Crossing Homeowners Association, Inc.  
Board of Directors Candidate Questionnaire

## Candidate Questionnaire

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ PREFERRED E-MAIL: \_\_\_\_\_

Introduce yourself; include business, homeowner association or other experience, number of years at Northpointe Crossing Homeowners Association, Inc. \_\_\_\_\_

\_\_\_\_\_

Desire/Reason in running for the Board of Directors. Include neighborhood interest, desired improvement for Northpointe Crossing Homeowners Association, Inc. \_\_\_\_\_

\_\_\_\_\_

Areas you feel need more of the Board of Directors attention in the up-coming year. What areas could you make the greatest contribution: Architectural, financial, legal, maintenance, social, etc. \_\_\_\_\_

\_\_\_\_\_

Commitments that may deter you from serving on the Board of Directors: (Travel, employment, other meetings, etc.) \_\_\_\_\_

\_\_\_\_\_

***By submitting this form, I acknowledge that I accept those responsibilities as described in the Bylaws if appointed, and I am aware that the information provided on this questionnaire may be published in a meeting or on the Association's website.***

Essex Association Management, LP  
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