



# POLAR

Polar Communications | Polar Telcom  
Polar Cablevision | Wolverton Telephone Co.  
PO Box 270 | Park River, ND 58270

## Director Application

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Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Present employer or occupation: \_\_\_\_\_

Educational Background: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Community Activities (boards, committees, etc.): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Briefly describe what you believe qualifies you to be a Polar Board member: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Do you have any specific goals for Polar Communications?: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Are you related to any board member or employee at Polar Communications?: \_\_\_\_\_

Provide any additional relevant information: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

The following is my social security number: \_\_\_\_\_

I authorize Polar Communications to use my social security number in order to conduct standard criminal background and credit checks.

Signature: \_\_\_\_\_

Polar Communications  
Board of Directors Qualifications  
Article IV, Section 3

**Please check Yes or No**

- a) Are you a natural person? Yes\_\_\_\_\_ No \_\_\_\_\_
- b) Are you a member in good standing (a member in good standing is a member who takes wireline telephone service from Polar and pays all amounts owed to Polar as and when such amounts are due and payable)?  
Yes\_\_\_\_\_ No \_\_\_\_\_
- c) Are you presently residing and have resided for the past two (2) consecutive years and shall remain a resident of the area served or to be served by the Cooperative? Yes\_\_\_\_\_ No \_\_\_\_\_
- d) Are you in any way employed or financially interested in a competing enterprise or business engaged in selling communications service or supplies or constructing or maintaining facilities?  
Yes\_\_\_\_\_ No \_\_\_\_\_
- e) Are you a current employee or the spouse of any employee? Yes\_\_\_\_\_ No \_\_\_\_\_
- f) Are you a former employee who has been employed by the Cooperative on a full-time basis during the past five (5) years, or the spouse of a former employee or spouse thereof, who is covered by any retirement or insurance benefit paid for partly or completely by the Cooperative?  
Yes\_\_\_\_\_ No \_\_\_\_\_
- g) Are you a convicted felon of any State or Federal crime? Yes\_\_\_\_\_ No \_\_\_\_\_
- h) Have you filed for bankruptcy at any time? Yes\_\_\_\_\_ No \_\_\_\_\_
- i) Are you able to attend a minimum of ten (10) regular scheduled board meetings, beginning with the board meeting in the month elected? Yes\_\_\_\_\_ No \_\_\_\_\_

I certify that I have read, understand, and fully comply with the qualifications to be nominated as a director.

Signature: \_\_\_\_\_

Please submit to: Polar Communications, Director Application, PO Box 270, Park River, ND 58270  
FAX: 701.284.7277  
Email: directorapp@polartel.com