



CONSERVATION DISTRICT CERTIFICATION
for Nomination as Soil & Water Conservation District Commissioner
(to be completed by Conservation District)

Instructions

This certification form must be completely filled out by the local conservation district board when acting upon a nominee for appointment to serve as a Conservation District Commissioner. Then it must be forwarded to the Chief of Conservation Districts, SCDNR, P.O. Box 167, Columbia, South Carolina, 29202, **with all appropriate signatures and a copy of the meeting minutes when this form was acted upon.**

SECTION I Personal Information

The Board of Commissioners of the _____ Conservation District nominates _____ to fill an _____ position as Soil and Water District Commissioner. This position is now vacant as a result of:

- Expiration of Term A Move to an Appointed Position Retirement Resignation Death

The **Former Commissioner** was _____ .
(NAME)

The **date position became vacant:** _____ .

SECTION II Advertising the Position

Conservation Districts should advertise position vacancies in public places or other venues. Did the Conservation District advertise the position vacancy by posting in public buildings, along with applicable job description, salary information and other related issues? Yes No If not, please explain:

SECTION III Conservation Partnership On Diversity

SCACD adopted a Conservation Partnership Policy on Diversity in 1995. When making recommendations to fill appointed positions and unexpired vacated elected positions, the board should consider race, gender, and other demographic factors to assure, to the greatest extent possible, equal representation from all segments of the population of the county, with a goal of ensuring that all segments of society are served by, and have the opportunity to participate in, our nation's conservation programs. Did the Board of Commissioners consider the **Conservation Partnership Policy on Diversity** when selecting this nominee for office? Yes No

SECTION IV Reappointment or Recommended from Elected Position to Appointed Position

The SCACD adopted a policy that Conservation District Commissioners consider the local board meeting attendance record of appointed District Commissioners at the time they are being considered for reappointment and that an appointed commissioner with a local attendance record of less than 75 percent over the previous two years of their term not be considered for reappointment, unless evidence is presented showing providential cause as a result of illness or other reasons, and that such extenuating circumstances are not expected to continue. If the Conservation District elects to recommend an individual who does not have an attendance record of at least 75 percent, a letter must be attached explaining why the district still recommends this individual.

During the **last two years of office**, the District has held _____ official meetings. The nominee has attended _____ of these meetings. If attendance is **less than 75 percent** at district board meetings for the **last two** years of term, please provide circumstances by which the nominee was hindered from attending the meetings.

The individual _____ held a position(s) of leadership on local Conservation District boards. If so, list what position(s) were held?

The individual has attended what meetings within the past two years? (These meetings include SCACD Fall Conferences, Legislative Conferences, Joint State Conferences, and SCACD Standing Committees.)

SECTION V

New Appointment

Has the nominee completed the application form, read over the outlined duties associated with the position of Conservation District Commissioner, and agreed to fill the job requirements? Yes No

SECTION VI

Official Signatures For Approval

This nomination has been considered and approved by the Board of Commissioners and has been inserted into the district minutes of an OFFICIAL meeting and a copy sent with this nomination form to Chief of Conservation Districts, SCDNR, P. O. Box 167, Columbia, South Carolina, 29202.

Signature of District Chairman/Secretary _____ Date of Signature _____ Date of Board Meeting When Action Taken

Signature of DNR Program Coordinator _____ Date of Signature