Washington Electric Cooperative, Inc.
A Touchstone Energy® Cooperative

EXHIBIT A
TRUSTEE CANDIDATE ELIGIBILITY FORM

Certain qualifications to be eligible to become and remain a Trustee are set forth in the Cooperative Bylaws and Board Policy. In addition, statutory and common law imposes certain duties upon Trustees. This form is to ensure eligibility for consideration by the Nomination Committee as a candidate for election to the WEC Board of Trustees.

Please review the material contained in the packet, complete and return this form by January 8, 2027.

Full Name: _____
(PRINT)

Address of Primary Residence: _____
(PRINT)

A. Trustee Qualification

1. **The Code of Regulations Article IV, Section 3, Qualifications states the nominee shall:**
   (a) Be a member of the Cooperative; and
   (b) Be a bona fide permanent resident within the service area of the Cooperative, receiving electric power and energy from the Cooperative at the primary residential abode for a minimum of three years of uninterrupted service; and
   (c) Not in any way employed by or financially interested in a competing enterprise or a business selling electric service, power and energy or supplies to the Cooperative;
   (d) Not be in any way employed by or financially in control of an enterprise that supplies goods or materials to or performs services for the Cooperative;
   (e) Not be a current employee, or is a former employee with less than five (5) years separation from the Cooperative;
   (f) Not be a close relative of a current employee or trustee; as used in this section, close relative means through blood, law, or marriage, is a spouse, child, stepchild, father, stepfather, mother, stepmother, brother, stepbrother, half-brother, sister, stepsister, half-sister, grandparent, grandchild, father-in-law, mother-in-law, brother-in-law, sister-in-law, son-in-law, or daughter-in-law; or resides in the same residence;
   (g) Abide by all current policies established by the Cooperative;
   (h) Not have been sixty (60) days in arrears on any payment or obligation to the Cooperative in the preceding three (3) years;

(i) Not have been convicted of any (i) felony, (ii) theft offense, (iii) drug abuse offense, or (iv) any other criminal offense other than minor traffic violations;
(j) Has not filed for bankruptcy in the past ten (10) years;
(k) Is fluent in speaking and writing the English language; and
(l) Be at least eighteen (18) years of age.

2. **Are you employed by, or financially interested in a company which competes with the Cooperative, sells energy or supplies to the Cooperative, or its primary business is selling electrical fixtures, or supplies to the members of the Cooperative?**

   Yes _____ No _____ if yes, explain _____

3. **Are you related by blood or marriage to an employee or Trustee of the Cooperative?**

   Yes _____ No _____ if yes, explain _____

B. <u>Attendance Requirements for Meetings</u>

A Trustee is responsible for, and must actively participate in, the governance of the business and affairs of the Cooperative. The Board of Trustees of the Cooperative is quite active. It is anticipated that you will spend a minimum of 15 to 24 days, on an annual basis, attending meetings of the Board of Trustees and General Membership, meetings of Affiliated Organizations and Training and Education seminars. **(Please see Exhibit C for a list of meetings)**

C. <u>Article IV, Section 5. Removal of Board Member</u>

Cause for Removal

(a) Failure to attend three (3) regular meetings of the Board during any twelve (12) consecutive meetings, or
(b) Is convicted, with any right of appeal having been completed, of any (i) felony, (ii) theft offense, or (iii) drug abuse offense not constituting a minor misdemeanor.

D. <u>Board Policy No. 206 Education/Training</u>

Each Trustee is required to achieve the Credentialed Cooperative Director (CCD) certification from the National Rural Electric Cooperative Association within two terms (6 years). There are five full day training courses necessary to obtain this certification. Most sessions are held in Columbus however, in order to complete the five courses in a timely manner, out-of-state and overnight travel may be required.

Are you able to commit to the amount of time to be actively involved in the affairs of the Cooperative including the attainment of the NRECA Cooperative Credentialed Certification within one term?

Yes _____ No _____

E. Experience and Candidate information

1. List service on other boards for corporations, cooperatives, educational institutions, government, service organizations, clubs or other boards and years and offices held if any:

   _____

   _____

   _____

2. Other information you deem relevant to be considered by the Nominating Committee:

   _____

   _____

   _____

3. Why are you interested in becoming a member of the WEC Board of Trustees?

   _____

   _____

   _____

4. What in your opinion are the greatest challenges facing the Cooperative in the future?

   _____

   _____

   _____

5. Do you currently own or have access to a PC and use the internet, email, Microsoft Word and Microsoft Excel? Yes _____ No _____

6. Other Information:

Currently Employed ☐ Retired ☐

If employed, name of organization: _____

Position: _____ Years with Current Employer: ___

If retired, name of organization: _____

Position: _____Years with Organization: _____

Education completed:

- ❑ High School/GED from _____
- ❑ Some College
- ❑ Degree (Assoc., B.A., B.S., Other _____)
  from _____
- ❑ Advanced degree (M.D. Ph.D., J.D., MBA, Other _____)
  from _____
- ❑ Other education (describe): _____

Completion of this form does not guarantee nomination by the Nominating Committee.

I, (print name) _____,
desire to be considered as a candidate for the election of Trustee of Washington Electric Cooperative, Inc. and hereby certify that I am a member and eligible and qualified and the foregoing information is true and correct to the best of my knowledge.

I also hereby agree that the foregoing information may be used by the Cooperative, its members, committees, employees, agents, or assigns, in determining my eligibility to serve as Trustee of Washington Electric Cooperative, Inc.., and that said information may be published and disseminated to the members or other persons in any form, including publication in *Ohio Cooperative Living Magazine*.

I hereby grant my consent to the nominating committee, or its agents or assigns, to verify the accuracy of the information contained in the application and information form above.

I expressly release all members, officers, trustees, employees, attorneys or agents of Washington Electric Cooperative, Inc. from any liability whatsoever for the use and/or dissemination of this information, including, without limitation, any claims for libel, slander, defamation or otherwise.

_____ _____
Member's Signature Date

Home Phone: _____ Cell Phone: _____

Email: _____

EXHIBIT B

AFFIRMATION OF TRUSTEE QUALIFICATION

I, the undersigned, hereby state and affirm as follows:

1. I have read, understand, and support the Cooperative's BOARD QUALIFICATIONS, CONDUCT AND PERFORMANCE to serve on the Board of Trustees.
2. I am qualified in accordance with the requirements to be nominated and elected or appointed as a Cooperative Trustee.
3. I am qualified to serve as such Trustee.

I have signed my name hereto and had the same witnessed this

_____ day of _____, 20__

_____
Signature

EXHIBIT C

TRUSTEE MEETINGS

EXPECTED TO ATTEND

Month	Meetings	# Days	Day/Night	Location
Every	Regular Monthly Board Meetings	12	Day	WEC
Varies	Special Board Meetings	2	Day	WEC
Feb.	OREC Annual Trustee Conference	2	Day	Columbus
May	WEC Annual Meeting	1	Thurs-night	Marietta
Varies	Strategic Planning (every 3-5 years)	2	Day	Marietta
Aug	OREC Annual Meeting	2	Day	Columbus
Varies	WEC Committee Meetings	varies	Day	WEC
	Sub Total	**20+**		

National Rural Electric Cooperative Association (NRECA)
Cooperative Credentialed Director (CCD) Certificate
Required Within 1 Term or 3 Years

Month	Meetings	# Days	Day/Night	Location
Varies	2600.2 Directors Duties & Liabilities	1	Day	Out of State or Columbus
Varies	2610.2 Understanding the Electric Business	1	Day	
Varies	2620.2 Board Roles & Relationships	1	Day	
Varies	2630.2 Business Planning	1	Day	
Varies	2640.2 Understanding the Financial Statement	1	Day	

New Trustee – Highly Encouraged to Attend

Varies	NRECA New Director Orientation	1	Day	Out of State
Varies	OREC New Director Orientation	1	Day	Columbus

Optional

Varies	NRECA Director Update	3	Day	Out of State
March	NRECA Annual Meeting	3	Day	Out of State
Sept	NRECA Regional Meeting	2	Day	Out of State
Varies	Other NRECA Training	1	Day	Out of State

The optional meetings are self-policed by the Board so not all attend at once but all eventually have an opportunity to attend.

Washington Electric Cooperative, Inc.
A Touchstone Energy® Cooperative

Candidate for Trustee Additional Information

As a candidate, you are asking your fellow members to vote for you in this year's trustee election. The information that you provide below, along with what you've provided in the Candidate Eligibility Form, will assist us in creating your biography. This information will be shared via social media, Ohio Cooperative Living magazine, media press releases, website, and with the election ballot so the voters may become familiar with you and why you seek election to the cooperative's board. Your personal information (phone numbers, e-mail address, mailing address) will not be shared.

Please print clearly.

Name: _____

Address: _____City: _____ZIP Code: _____

Home Phone: _____ Cell Phone: _____

E-mail Address: _____

Date of Birth: _____ # of Years as a Washington Electric Co-op member: _____

Please answer the following questions <u>as concisely as possible, using complete sentences.</u>
<u>Due to space constraints, please try to use only the allotted space for each question.</u>

If elected to the board, what will be your priorities? _____

_____

_____

_____

_____

_____

Is there a particular issue that motivates you to serve on the board? _____

What experiences or skills have prepared you to serve as a board member? _____

Washington Electric's mission is *to improve the quality of life for our members and community by safely and responsibly delivering reliable electric service, innovative energy solutions, and superior member service*. What makes this mission meaningful to you, and how will your values align with the cooperative's shared values?

What do you see as the challenges facing this organization, and how would you contribute to overcoming them?

What do you see as this organization's greatest asset, and how would you work to protect and enhance it?

Why should Washington Electric Cooperative's members vote for you? _____

In addition to the information provided on this form, candidate biographies will also include a headshot photograph of the candidate. If nominated, we will contact you to arrange a time and date to have this photo taken by a professional photographer.

I, by my signature below, a Candidate for Trustee of Washington Electric Cooperative, Inc., do understand and consent to the general information above (except for personal contact information), as well as information I've provided in the Candidate for Trustee Eligibility Form, being shared with the public via publications, website, and social media.

_____ _____

Signature of Candidate Date

Criminal Background Report Release Form

Please Read Carefully

By my signature below I authorize Washington Electric Cooperative, Inc., to obtain a Criminal Background Report on me. This authorization is valid for purposes of verifying information given pursuant to employment, leasing, rental, business negotiations, or any other lawful purpose covered under the Fair Credit Reporting Act. (FCRA)

The Criminal Background Report may contain information available in the Public Domain but may not include interviews with persons other than previous employers or their agents.

By my signature below, I hereby authorize all corporations, former employers, credit agencies, educational institutions, law enforcement agencies, city, state, county and federal courts and agencies, military services and persons to release all information they may have about me including criminal and driving history. This authorization shall be valid in original or copy form.

Applicant's Name _____

Social Security Number _____

Date of Birth _____

Current Street Address _____

City, State, Zip Code _____

Drivers License # _____ State _____

Signature _____

Date_____