



Board of County Commissioners Agenda Request

2AE

Agenda Item #

Requested Meeting Date: December 17, 2024

Title of Item: Appointment for Resident HRA Commissioner

<input type="checkbox"/> REGULAR AGENDA <input checked="" type="checkbox"/> CONSENT AGENDA	Action Requested: <input checked="" type="checkbox"/> Approve/Deny Motion <input type="checkbox"/> Adopt Resolution (attach draft) <input type="checkbox"/> Hold Public Hearing <i>*provide copy of hearing notice that was published</i>	<input type="checkbox"/> Direction Requested <input type="checkbox"/> Discussion Item <input type="checkbox"/> Information Only
Submitted by: Teresa Smude		Department: Aitkin County HRA
Presenter (Name and Title): n/a		Estimated Time Needed: n/a
Summary of Issue: <p>Attached please find an Application for Laura Emanuel to be appointed as a resident commissioner for a five year term to the Aitkin County HRA board of commissioners. Pursuant to the Code of Federal Regulations, title 24, part 964, one of the appointments to the board is reserved exclusively for a housing tenant.</p> <p>As pursuant to statute, all appointments to the HRA board must be made by the County Commissioners.</p>		
Alternatives, Options, Effects on Others/Comments:		
Recommended Action/Motion: Motion to approve appointment of Laura Emanuel as a resident commissioner on the Aitkin County HRA Board.		
Financial Impact: <p>Is there a cost associated with this request? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>What is the total cost, with tax and shipping? \$</p> <p>Is this budgeted? <input type="checkbox"/> Yes <input type="checkbox"/> No Please Explain:</p>		

Legally binding agreements must have County Attorney approval prior to submission.

MINNESOTA OPEN APPOINTMENT ACT

APPLICATION FOR SERVICE ON COUNTY/STATE AGENCY

NAME OF AGENCY OR COMMITTEE YOU WISH TO SERVE ON:

Housing and Redevelopment Authority of Aitkin County

AITKIN COUNTY COMMISSIONER DISTRICT Resident Commissioner

Minnesota Statutes 15.0597, state that the application shall include a "statement that the nominee satisfies any legally prescribed qualifications and any other information the nominating person feels be helpful to the appointing authority." (May include employment, community service experience, or education that would be pertinent to this appointment)

I have served on the HRA board of commissioners since April 2019. I have learned a lot and
have enjoyed my time on the board. I would like to serve another term as a representative
on the board for the residents of the Aitkin County HRA.

I, the undersigned, hereby state that I satisfy, to the best of my knowledge, all legally prescribed qualifications for the position sought.

Laura Emanuel

Signature of Applicant

11-20-24

Date

If applicant is being nominated by another person or group, the above signature indicates consent to nomination.

Is this application submitted by appointing authority? Yes ☐ No ☐

Is this application submitted at the suggestion of appointing authority? Yes ☐ No ☐

**Please return application to the Aitkin County Administrator's office, located at
307 2nd Street NW - Room 310, Aitkin, MN 56431**

NAME OF APPLICANT: Laura Emanuel

STREET ADDRESS OF APPLICANT:

536 Gill Street, Apartment 211

Hill City, MN 55748

PHONE NUMBERS:

DAYS 763-202-5671

EVENINGS Same

For Office Use Only

Date Appointed: _____

Date of Term Expiration: _____

Term #: _____