## CITY OF \_\_\_\_\_\_APPLICATION FORM FOR BOARDS/COMMISSIONS/COMMITTEES

Please Return To:
\_\_\_\_ City Clerk's Office, Address
Phone: (XXX) XXX-XXXX

lame	
Address	
Phone Number	E-mail Address
Business Phone	Cell Phone
ommission or committee. State la	in evaluating the qualifications of applicants for appointment to a board, aw requires political subdivisions to make a good faith effort to balance committees, and councils authorized by the Code of Iowa according to each year thereafter.
Please list your place of en hat you feel may qualify yo	nployment/or activities such as hobbies, volunteer work, e ou for this appointment:
Pease describe why you ar	re interested in serving on the
,,,	(Name of Board/Commission or Committee)
	(Name of Board/Commission of Committee)
nclude any other informat	ion that supports your interest.
nclude any other informat	ion that supports your interest.

What contrib	utions do you fee	l you can make.		
		ve, are you interested ommittee? Please indi		
Please provi appointment Name		who may be contacte  Phone number		tions for this  Relationship
I certify that the committee.	nere is nothing that	would prohibit me from	serving on this board	d, commission or
Signature _		Date		

YOUR APPLICATION WILL BE RETAINED FOR ONE YEAR.
THIS APPLICATION IS A PUBLIC DOCUMENT AND AS SUCH CAN BE VIEWED,
REPRODUCED OR DISTRIBUTED TO THE PUBLIC.