



**CITY OF RUNAWAY BAY
BOARD OR COMMISSION
APPLICATION FOR APPOINTMENT**
(Feel Free to use back if necessary)

DATE SUBMITTED: _____ NAME: _____

<i>(Number in order of preference)(1,2,3,4)</i>			
Planning & Zoning:	<input type="checkbox"/>	Park Board:	<input type="checkbox"/>
Economic Development Corporation:	<input type="checkbox"/>	Cemetery Commission:	<input type="checkbox"/>

PERSONAL INFORMATION	OCCUPATIONAL INFORMATION
Home Address: _____ Telephone: _____ Resident within Runaway Bay City Limits for _____ years Property Location: Unit _____, Block _____, Lot _____ <u>Qualified Voter</u> <input type="checkbox"/> Yes <input type="checkbox"/> No	Business Name: _____ Occupation: _____ Address: _____ Telephone: _____
Are you related to the mayor, any council member, city administrator, and/or city secretary? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, please state relationship (spouse, cousin, brother, sister, in-law, etc.)	
First Time Appointment <input type="checkbox"/> Yes <input type="checkbox"/> No Reappointment: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you attended a meeting the particular board/commission/committee to which you seek appointment or have you talked to anyone currently on the board? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, indicate which one(s):	
Do you understand the time commitment required for meetings as well as preparation prior to meetings? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Do you understand that it is very important that you attend all regular meetings of the board/commission/committee you have applied for and the importance of completion of your term? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Why do you want to serve on this board/commission/committee?	
Boards/commissions/committees you have previously served on: (Dates, Names, Locations)	
Special knowledge or experience qualifying your for this appointment:	

Signature

Printed Name