

MICHIGAN

## **APPLICATION FOR APPOINTMENT TO BOARDS & COMMISSIONS**

Name:	Date:	
Residence Address:	<u> </u>	
Email:	Phone:	
Which Committee/Commission are you applying for?		
Zoning Board of Appeals	Cemetery Board	
Planning Commission	Marihuana Licensing Board	
Board of Review	Parks & Recreation Committee	
Other		
Please state your interest, experience and/or education that would relate to serving on the above		
named board, committee, or commission:		
Why are you interested in serving on this Commission/Committee? Are there current events that have spurred your interest?		

Current Employer/Recer	nt Employment:	Position:
Dates of Employment: _		
Education/School:		Degree/Cert Received:
AVAILABILITY:		
Among other things, the is very important. Will yo	·	e available of the activities of a Board or Commission
EVENING MEETINGS:	Once per month	Twice per month Once per week
DAYTIME MEETINGS:	Mornings	Afternoons All day
I certify that the informa knowledge.	ition contained on this for	m is accurate, true and complete to the best of
Signature:		Date:
Please remit form to: April Storms, City Manag	ger	

citymanager@cityofwhitecloud.org

12 N. Charles PO Box 607

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