APPLICATION FOR APPOINTMENT DICKINSON COUNTY BOARD, COMMITTEE OR COMMISSION

(Please note only legible applications can be considered)

Ī,	, hereby submit an application for appointment to		
NAME OF BOARD OR COMMISSION	for Number of years	from	Exact dates of Appointment
THE OF BOTHE OR CONTINUEDION	Number of your	*	
to	 ·		
TO THE DICKINSON COUNTY BOARD	OF COMMISSION	ERS:	
1. I reside atStreet	•		
Street	City		Zip
*	and have since		
County			
Mailing address if different than above:	- X		
Telephone:	Cell Pho	one:	
Email Address:			
2. I am at least 18 years of age: YES	NO		
3. I am currently registered to vote: YES	NO		
4. Employer:		Telephone: _	
a. Indicate nature of your work:			
h Title		2	
b. Title:			
5. Educational Level and degrees received:		*	
5. I presently hold the following appointment	s and elected positions	s:	
-		· ·	
7. Previously held appointments and/or elected	ed positions:	i	
-		,	

not automatically bar you from an appointment.

9. Do you have a conflict of interest or potential conflict of interest such as a financial or business interest in any contracts, grants, permits, etc. with Dickinson County? If so, list the interest (except where required for the appointment).
10. List any family members who are or have been employed by Dickinson County or are or have been elected to County offices.
11. Is this an application for reappointment? Yes No
If yes, how many years have you served on this board?
Please indicate your attendance record for the term(s) served No. of meetings attended No. of meetings attended No. of meetings held
12. Briefly indicate your qualifications for appointment to this specific board and why you believe your appointment will benefit Dickinson County.
and do swear or affirm that (1) if appointed, I will comply with all statutory and other requirements and obligations of my appointment; (2) if I cease to comply with such requirements, I automatically forfeit said appointed position; (3) I hold no position or appointment which is a conflict of interest with the appointed position applied for; and (4) to the best of my knowledge and belief, I possess the requisite qualifications for the office I am seeking.
Signature
Name (Print or Type)

Note: Applicants may attach additional information pertaining to this application for appointment.

- Resume
- Letter of Reference
- Letter of Intent