

OKANOGAN COUNTY - COMMISSIONERS' OFFICE
Board and Commission Appointments
APPLICATION FORM

Name: _____

Home Address: _____

Business Address: _____

Phone: (____) _____

Phone: (____) _____

Legislative District# _____

Commissioner District# _____

Boards/commissions for which you wish to be considered:

Education (high school; name/location of college or university; year graduated; degree)

Licenses held (if applicable to specific board/commission):

Current employment (job title, employer, employment date, contact, phone)

Previous employment/experience:

Memberships in professional/civic organizations (include offices held and dates of terms):

References: _____

Applicant's Signature: _____ Date: _____