

____/____/____
Application Date

Office of the Mayor
BOARD AND COMMISSION APPLICATION

Interested in appointment to _____

Name _____ Date of Birth _____

Home Address _____ Zip Code _____

Home Telephone _____ Work Telephone _____

Business Address _____

E-mail Address _____

COMMUNITY INVOLVEMENT

(List organizational affiliations and community activities)

WORK EXPERIENCE

Present employer (name and address)

Brief statement of employment and work experience _____

EDUCATION AND TRAINING

Name / location of high school _____ Year graduated _____

Education/training beyond high school

Name & Location	From Mo/Yr	To Mo/Yr	Credits Earned	Course or Areas of Study	Degrees Earned

PERSONAL REFERENCES

<u>Name</u>	<u>Address</u>	<u>Telephone</u>
1.	_____	_____
2.	_____	_____
3.	_____	_____

ADDITIONAL INFORMATION

Please describe any special qualifications, experience or interests that should be considered in reviewing your application.

Date _____ Signature _____

Thank you for your interest in good government.

When completed please return form to

Elgin City Clerk
150 Dexter Court
Elgin, IL 60120-5555
(847) 931-5660

Submit via email to: dewis_k@cityofelgin.org

APPLICATION WILL REMAIN ON FILE FOR TWO YEARS

<u>Office Use Only</u>	Database: _____	Sent to Council: _____
	Appt'd: _____	Resolution # _____