124 West Huron Road Post Office Box 121 Au Gres, Michigan 48703



Phone (989) 876-8811 Fax (989) 876-6462 www.cityofaugresmi.com cityofaugres@cityofaugresmi.com

## **BOARD & COMMISSION APPLICATION**

Your interest and expressed willingness to serve the City of Au Gres is appreciated. The purpose of this application form is to provide the Mayor and City Council with basic reference data and information pertaining to residents being considered for appointment to a City Board or Commission. The information supplied on this form will be available only to the Mayor/City Council in their deliberation for such appointments. Minimum educational requirements have not been established. Advanced education or college degrees are not necessary to be considered for appointment.

		Date:	
		A Charles	
Print	Name:		
	Last	First	Middle
Stree	t Address	City	Zip Code
 Emai	I Address	Telephone	e Number
Empl	oyer:	Business Telephone #:	
Busir	ness Address:		
	Street Address	City	Zip Code
1).	Are you a City resident?	If so, how long?	
2).	Are you currently serving on or have	you served on any City Boards? Pleas	e list boards if served.
3).	Are you a registered voter?		
4).	Are you paid up-to-date on your real	or personal property taxes? YES	NO
5).	Professional Qualifications and/or W	/ork Experience:	0.00

6).	Community Activities and/or Other Experience:		
7).	Reasons for desire to serve:		
8).	Optional- Please list referen	ces with full names and addresses:	
9).	Education Achievement	High School Graduate: YES  Date Graduated or left school:	
10).	Business College, Correspor	idence School, Night School, and/or Oth	ner Attended:
		EASE MARK YOUR CHOICES ne, list in priority, ie., 1- First Choice, 2-5	Second Choice, etc).
	City Council Planning Commission Board of Review Library Board Liaison Zoning Board of Ap Election Board Fire Board Building Authority Board Parks & Recreation TIFA Board Arnac County Herita	n peals Board Board age Route	
		Signature	