



**CITY OF ST. JOSEPH
 CITY CLERK'S OFFICE
 700 Broad Street
 St. Joseph, MI 49085
 Phone (269)983-6325
 Fax (269) 985-0347
 www.sjcity.com
 clerk@sjcity.com**

APPLICATION FOR APPOINTMENT TO A BOARD, COMMISSION or COMMITTEE

Thank you for your interest in serving the City of St. Joseph. In order for the City Commission to evaluate Board, Commission or Committee appointments, this application needs to be completed and returned to the City Clerk's Office. For additional space, feel free attach additional pages, if necessary. This application will be kept current for one (1) year from the date it was submitted; a new application is necessary annually.

Name: _____ Date: _____

Home Address: _____

Primary Telephone Number: _____ Secondary Number: _____

E-mail Address: _____

Please indicate which Board(s), Commission(s) or Committee(s) you are interested in serving as a member. Please indicate your choices with number "1" representing your first choice, number "2" representing your second choice, etc.:

- | | |
|--|---|
| <input type="checkbox"/> Airport Authority Board
<input type="checkbox"/> Board of Review
<input type="checkbox"/> Brownfield Redevelopment Authority
<input type="checkbox"/> Cemetery Board
<input type="checkbox"/> Construction Board of Appeals AND
Property Maintenance Board of Appeals
<input type="checkbox"/> Downtown Development Authority
<input type="checkbox"/> Housing Development Authority
<input type="checkbox"/> Joint Waste Water Treatment Board | <input type="checkbox"/> Library Board
<input type="checkbox"/> Municipal Officers Compensation Board
<input type="checkbox"/> Parks and Recreation Advisory Board
<input type="checkbox"/> Planning Commission
<input type="checkbox"/> Recreational Harbor Authority
<input type="checkbox"/> Retirement System Board
<input type="checkbox"/> Sustainability Committee
<input type="checkbox"/> Water Services Joint Operation Board
<input type="checkbox"/> Zoning Board of Appeals
<input type="checkbox"/> Other: _____ |
|--|---|

Please provide availability: ___ Morning ___ Afternoon ___ Evening

___ Mondays ___ Tuesdays ___ Wednesdays ___ Thursdays ___ Fridays

Please explain why you want to serve as member of a Board, Commission or Committee?

What training, experience or other qualifications do you have which may help to strengthen the membership of a Board, Commission or Committee?

If you are interested in serving on a particular Board, Commission or Committee, in your own words, what should be the function of that Board, Commission or Committee?

Have you been able to review an agenda packet or attend a meeting? _____

If training is available free of cost to you, would you attend? _____

Please feel free to share additional information or thoughts.
