## Application for City Boards/Commissions/Committees (PLEASE TYPE OR PRINT CLEARLY)

	Date:
Name:	
	SS:
Phone	Number:
Occup	ation:(If retired, indicate former occupation or professions)
Educa	tion:
Profes	sion and/or Community Activities:
	onal Pertinent Information/References:
	terested in serving on the: e check)
( ) Pla	anning Commission
( ) Ho	ousing Authority
( ) Bo	pard of Zoning Adjustment
( ) Lik	orary Board
( ) Ci	ty Council (should a vacancy occur)
( ) Ot	her:
	Signature of Applicant