



COUNTY OF ST. CLAIR



Boards and Commissions Application

First Name: _____ Middle Initial: _____ Last Name: _____

Home Address: _____ E-mail: _____

City: _____ Zip Code: _____ H M B _____

I am at least 18 years of age: Yes No H M B _____

Employer: _____ Title: _____

Nature of Employment: _____

Educational Level: _____ Degree Received: _____

Board and/or Commission interested in serving on:

Community activities and/or experience:

Previous Held Appointments: _____ Length of Appointment: _____

Other information you wish to provide to qualify you to serve on the Board and/or Commission:

Available for day time meetings? Yes No Available for evening meetings: Yes No

Upon appointment, the applicant must complete a standard background check including, but not limited to drug screening, driving record check, criminal background, and sex offender registry.

Signature

Date