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## **APPLICATION FOR APPOINTMENT**

## BOARD/COMMITTEE/COMMISSION

Name of Board/Committee/Commission you're applying for: \_\_\_\_\_

Name:			
Last Middle		First	
Cell #: Home	e #:		
Email:			
Street Address:		Zip code:	
Mailing Address (if different):		Zip code:	
Occupation:	Employer: _		
Primary residence within Alexander City, city limits?	Yes	No	
Length of Residency: A	re you a regis	stered voter? Yes	sNo
Which council district do you reside in?			
Are you currently serving on a Board/Committee/Commission?		Yes	No
Have you attended meetings of the Board you are applying for?		Yes	No
Will your schedule allow you to regularly attend meet	tings of the bo	pard you're apply	/ing for?
		Yes	No

Are you aware of any potential conflicts of interest that may arise during your service on this board? If so, please explain:

Please indicate the area(s) of expertise that you can bring to the Board/Committee/Commission. Please list education, experience, and reasons for your interest:

Signature

Date

07/01/2023