

APPLICATION - MARQUETTE COUNTY BOARDS/COMMISSIONS

NAME \_\_\_\_\_ DATE \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY/TOWNSHIP \_\_\_\_\_ ZIP \_\_\_\_\_

OCCUPATION \_\_\_\_\_ AGE \_\_\_\_\_

TELEPHONE: Home \_\_\_\_\_ Business \_\_\_\_\_ (answer is voluntary)

BOARD/COMMISSION APPLYING FOR \_\_\_\_\_

APPLICATION CATEGORY (if it applies) \_\_\_\_\_

If applying for more than one Board/Commission list order of preference:

1) \_\_\_\_\_ 2) \_\_\_\_\_ 3) \_\_\_\_\_

What other Boards/Commissions have you served? \_\_\_\_\_

\_\_\_\_\_

Could you regularly attend scheduled Board/Commission Meetings?  
YES \_\_\_\_\_ NO \_\_\_\_\_ CONFLICTS \_\_\_\_\_

Why do you wish appointment to this Board/Commission? \_\_\_\_\_

\_\_\_\_\_

What are your Qualifications/Credentials for appointment? \_\_\_\_\_

\_\_\_\_\_

What is your understanding of the mission of this Board/Commission? \_\_\_\_\_

\_\_\_\_\_

References (list names, addresses, and telephone numbers)

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Signature \_\_\_\_\_

**\*\*Attach additional information if desired\*\***

Mail to: Connie M. Branam, Marquette County Clerk  
Courthouse, 234 W. Baraga Avenue  
Marquette, MI 49855 Or FAX: (906) 228-1572