

Date of Filing _____

**BOARDS & COMMISSIONS APPLICATION
CITY OF WATERLOO, IOWA
FAX: 2 9 1 - 4 2 8 6**

Board/Commission I request appointment to: (Must state preference)

1. _____ 2. _____

Name: _____

Home Address: _____

Telephone: _____

Employer's Name: _____

Business Address: _____

Telephone: _____

Job Title: _____

How long have you resided in Waterloo? _____ years

Current membership in organizations and offices held: _____

I am available for meetings: A.M. P.M. Noon Evenings

I am available to serve on a Board/Commission the entire year:

Yes No

Spring Summer Fall Winter All Seasons

Please briefly explain your qualifications for appointment to designated Board/Commission:

Additional information and comments that may not be evident from information already on this form:

References: _____

I hereby understand that this application does not bind me to acceptance of an appointment should I be offered, nor does it guarantee me an appointment to a Board/Commission. Also, if selected I will be available to attend the appropriate training sessions.

Signature

RETURN FORM TO THE MAYOR'S OFFICE, 715 MULBERRY, WATERLOO, IA 50703 291-4301