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| Applicant information | | | |
| Name: | Phone #: | | |
| Address: | | | |
| Email: | | | |
| Board/commission | | | |
| I am interested in serving on the following City of West Liberty volunteer board: | | | |
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| Board of Adjustment \_\_\_\_\_\_\_ Planning and Zoning Commission \_\_\_\_\_\_\_ | |  | |
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| How long have you been a resident of the City of West Liberty? | | | |
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| Why do you want to serve on this volunteer board/commission? | | | |
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| Have you served on this, or any other city of west liberty board/commission before? If so, please list below: | | | |
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| **Thank you for your interest! Applying for a position on a volunteer board/commission does not guarantee being appointed to that position. Applications will be reviewed by the members of that board/commission and Mayor before approval by the City Council. Please be advised, board/commission members serve without compensation.** | | | |
| Mail or Drop Off: City of West Liberty, 409 N Calhoun Street, West Liberty IA, 52776 | | | |
| Signature: | | | Date: |