



# CITY OF WEST LIBERTY

## Board/Commission Application

### APPLICANT INFORMATION

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

### BOARD/COMMISSION

I am interested in serving on the following City of West Liberty volunteer board:

**Board of Adjustment** \_\_\_\_\_

**Planning and Zoning Commission** \_\_\_\_\_

How long have you been a resident of the City of West Liberty?

Why do you want to serve on this volunteer board/commission?

Have you served on this, or any other city of west liberty board/commission before? If so, please list below:

**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: \_\_\_\_\_