

## APPLICATION FOR BOARDS AND COMMISSIONS

NAME: (F)	_ (M.I.)	(L)			
ADDRESS:					
TELEPHONE #:	EMAIL:				
HOW LONG HAVE YOU BEEN A RESIDE	NT OF THE V	ILLAGE OF MID	DLEVILLE?		
ARE YOU A REGISTERED VOTER OF TH	E VILLAGE O	F MIDDLEVILLE	E? YES	NO	
ARE YOU RELATED TO AN EMPLOYEE / *PLEASE INDICATE WHO AND YOUR RE					_ NO
I AM RELATED TO	R	ELATIONSHIP			
BOARD OR COMMISSION YOU ARE APP	YING FOR: _				
NEW APPOINTMENT REA	PPOINTMEN	Т			
COULD YOU REGULARLY ATTEND SCHE	DULED MEE	TINGS?`	YES NO		
ARE YOU ABLE TO ATTEND MEETINGS	BETWEEN 9:	00 AM AND 5:0	00 PM? YE	S NO	
ARE YOU ABLE TO ATTEND MEETINGS	IN THE EVEN	IING?YE	s NO		
WHY DO YOU WISH APPOINTMENT TO	THE BOARD/	COMMISSION?			
EXPERIENCE/QUALIFICATIONS THAT	WOULD M		N EFFECTIVE		
BOARD/COMMISSION FOR WHICH YOU	HAVE APPLIE	ED:			
COMMUNITY ACTIVITIES AND/OR OTHE	R EXPERIEN	CE:			
THIS APPLICATION WILL BE RETAINED	FOR SIX MON	NTHS			
APPLICANT SIGNATUI	RE		DATE		
**************************************	RECEI\	/ED BY			