

BARRY COUNTY BOARD OF COMMISSIONERS
APPLICATION FOR APPOINTMENT TO:

- | | | |
|---|--|--|
| <input type="checkbox"/> Agriculture Preservation Board | <input type="checkbox"/> Airport Commission | <input type="checkbox"/> Animal Control/Shelter Advisory Bd. |
| <input type="checkbox"/> Board of Canvassers | <input type="checkbox"/> Building Authority | <input type="checkbox"/> Central Dispatch/E911 |
| <input type="checkbox"/> Charlton Park Village/Museum* | <input type="checkbox"/> Commission on Aging | <input type="checkbox"/> Community Corrections |
| <input type="checkbox"/> Construction Board of Appeals | <input type="checkbox"/> Department of Human Services | <input type="checkbox"/> Local Emergency Planning |
| <input type="checkbox"/> Mental Health Authority | <input type="checkbox"/> Parks & Recreation* | <input type="checkbox"/> Planning Commission* |
| <input type="checkbox"/> Road Commission | <input type="checkbox"/> Solid Waste Oversight Committee | |
| <input type="checkbox"/> Transit | <input type="checkbox"/> Zoning Board of Appeals* | <input type="checkbox"/> Tax Allocation Board |

* *Denotes evening meetings*

Please check the above to which you are applying

Please be advised that this is a public document.

Name (Please print): _____

Township: _____

Address: _____

City/State/Zip: _____

Daytime Phone: _____

Evening Phone: _____

Occupation: _____

Employer: _____

Can you attend meetings between 8:00 a.m. - 5:00 p.m.? Yes No Evenings? Yes No

Please list membership on any other board/committee/authority (attach separate sheet if needed):

Please indicate experience and/or qualifications that would help make you an effective member of each board/committee/authority for which you have applied:

Please list any unique or valuable perspectives and/or resources you could bring to the board/committee/authority:

Please explain below why you wish to serve (attach separate sheet if needed):

Have you ever been convicted of a felony? Yes No

If yes, state when, where, and nature of offense:

Please list any conflicts of interest you may have if chosen for this position:

Current members must submit a new application at the end of their term if they wish to reapply. The deadline for applications from the incumbents is the same as the deadline for new applicants. Applications are considered active until published positions are filled.

The applicant acknowledges that he/she serves at the pleasure of the Board of Commissioners and can be removed by the Board without cause unless a particular term is established by federal or state statute.

I specifically authorize the Barry County Sheriff Department or other law enforcement agencies to release any records of prior criminal convictions it may have or may obtain from other sources to the County of Barry. I verify that the information provided herein is true and complete. I understand that false or misleading statements may be cause for elimination from consideration

For the purpose of this form a digital signature has the same power and effects as an actual hand written signature. To complete a digital signature please just type your full name in the box below.

Signature: _____

Date: _____

**Please return to: Barry County Administration, 220 W. State St., Hastings, MI 49058
Phone: (269) 945-1284 Fax: (269) 948-4884**