

City of Greenland  
Application Form  
For Appointments to City Boards, Commissions, and Committees

Name	Occupation/Employer Name		
Resident Street Address	City	State	Zip Code
Mailing Address (if different)	City	State	Zip Code
Home Phone#	Business Phone #	Email Address	

Choice of Committee \_\_\_\_\_ Length of Residency in the City Limits of Greenland \_\_\_\_\_

Are you a Greenland registered voter? Yes \_\_\_\_\_ No \_\_\_\_\_

1. What are your qualifications for serving on this committee, including education and expertise in the subject matter?

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2. Why would you like to be considered for appointment to this committee?

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References:

Name	Address	Phone
Name	Address	Phone

How did you hear about the opening(s)?

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Office Use Only:	
Appointed _____	Terminated _____
Term Expires _____	Replaced _____

