

CITIZEN COMMITTEE PARTICIPATION

You must be a resident of the City of Escanaba

I desire to be considered for one of the following Boards, Commissions, or Committees: □ Board of Equalization and Review **Board of Library Trustees** Brownfield Redevelopment Authority Citizens' Environmental Advisory Committee Defined Benefit Retirement Plan Board Data Board ☐ Downtown Development Authority Electrical Advisory Committee Cerk's Office Harbor Advisory Committee **Historic District Commission** ☐ Housing Commission ☐ Liquor License Review Board Loan Administration Board ☐ Local Officer's Compensation Commission No preference - interested in getting involved □ Planning Commission Public Safety Retirement Board □ Recreation Advisory Board Traffic Safety Advisory Committee □ Zoning Board of Appeals Print Name: ______ P. O. Box # _____ Address: Home Phone: _____ Work Phone: _____ Email: _____

Signature: _____ Date: _____

RETURN TO: City Clerk, P O Box 948, 410 Ludington Street, Escanaba, Mi 49829-0948 EMAIL: Clerk@escanaba.org

RESUME PROFILE

The following questions are voluntary and will be used to assist in making appointments:	
Print Name:	Name: Vocation: Sof Residence: Vocation: Employer's Address: Soyer: Employer's Address: Soyer: Soyer: Employer's Address: Soyer:
Years of Residence:	Vocation:
Employer:	Employer's Address:
Have you previously	served on any Boards, Commissions, or Committees?
When and Which On	es?
Special Interests?	City Clerk's Office
Reason you wish to s	erve: