



APPLICATION TO SERVE ON A CITY BOARD OR COMMISSION

Name: _____ Occupation: _____

Address: _____ Phone: _____

_____ Phone: _____
Home

_____ Phone: _____
Business

E-mail: _____ How long have you been a Johnston resident: _____

I am interested in serving on the following Board/Commission(s):

Board of Adjustment – 5 year term

Park Advisory Board – 3 year term

Tree Board – 3 year term

Library Board - 6 year term

Planning & Zoning Commission – 5 year term

Senior Citizens Advisory Board – 2 year term

State law requires gender balance, please indicate your gender: Male Female

List boards/commissions you have served on in Johnston or other community (include your dates of service):

Other Civic Activities: _____

Describe why you are interested in serving on the Board/Commission: _____

What knowledge and experience do you have that will be helpful in serving on the Board/Commission: _____

Other comments and/or information: _____

Signature: _____ Date: _____

Please return by _____ to: City of Johnston, Attn. Administration, PO Box 410, Johnston, IA 50131 or via email to info@cityofjohnston.com

This application is considered a public record and will be kept on file for one year. If you are not chosen to serve on the Board/Commission for which you applied, would you consider being contacted to serve on another Board/Commission?

____ Yes ____ No

Which other board/commission(s) would you be interested in: _____

FOR OFFICE USE

Date received: _____

Comments: _____
