



CITY OF GRAND LEDGE
APPLICATION FOR APPOINTMENT

Board, Committee, or Commission to which appointment is desired.

(If more than one, please list in order of preference):

Name: _____ Occupation: _____

Employer: _____

Email Address: _____

Home Address: _____

Street

City

Zip

Home Phone: _____ Business Phone: _____

Length of Residency in the City of Grand Ledge: _____

List other community organizations/commissions that you are a member:

Please indicate below the background or experience you have that will be of value if you are appointed.

Also, indicate any reasons for desiring to serve on the requested board or committee. (Please continue on reverse side if needed and be sure to sign and date. Please attach resume or other pertinent information if so desired):

Date of Application

Signature

Please mail this application to the address below or email to gnewman@cityofgrandledge.com.

City of Grand Ledge
ATTN: City Clerk
310 Greenwood St.
Grand Ledge, MI 48837