



# VILLAGE OF STOCKBRIDGE

PO Box 155, Stockbridge, Michigan 49285

## APPLICATION FOR APPOINTMENT TO COMMITTEES, BOARDS, AND COMMISSIONS

The information provided on this form is for the use of the Stockbridge Village Council in its deliberation to fill vacancies on committees, boards, and commissions. Applications may be submitted at any time and will be kept on file for a period of one (1) year. Applicants may be asked to attend a designated meeting of the Village Council for application review and appointment consideration.

To which committee (s), board (s), or commission (s) are you seeking appointment?

Please print or type.

Name: \_\_\_\_\_

Address: \_\_\_\_\_ ZIP Code \_\_\_\_\_

Telephone: \_\_\_\_\_ Other: \_\_\_\_\_

Email: \_\_\_\_\_

Date available for appointment \_\_\_\_\_

Are you a registered voter in the Village of Stockbridge?      \_\_\_\_\_ Yes      \_\_\_\_\_ No

Please complete the following. You may use additional sheets as needed.

**Community Service**

List boards, commissions, committees, or community service organizations that you are currently serving or have served upon, offices held, and in what municipality or county.

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**Employment and Education**

List any employment experience or education that, in your opinion, best qualifies you for this appointment. List job titles, duties (current and past), level of education and any certificates or degrees you have obtained.

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Have you ever worked for the Village of Stockbridge?      \_\_\_\_\_ Yes      \_\_\_\_\_ No

If yes, please list dates and name(s) of departments.

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**Personal**

Rules of law and ethics prohibit appointees from participating in and voting on matters in which they may have a direct or indirect financial interest. Are you aware of any potential conflicts of interest?      \_\_\_\_\_ Yes      \_\_\_\_\_ No

If yes, please indicate potential conflicts.

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Are you aware of the time commitment necessary to serve on the committee, board, and/or commission to which you seek appointment and will you have such time?

\_\_\_\_\_ Yes    \_\_\_\_\_ No

Please provide information about specific training, education, experience, or interest you possess that qualifies you as an appointee to the position you seek.

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I hereby certify that the preceding information is correct and to the best of my knowledge.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Mail or return your completed application to:      **Village of Stockbridge**  
   **210 Wood Street, Suite 101**  
   **PO Box 155**  
   **Stockbridge, Michigan 49285**

*Thank you very much for giving us the opportunity to consider you for appointment.*