



VILLAGE OF SEBEWAING
 INTEREST NOTIFICATION FORM
 FOR VILLAGE APPOINTED COMMISSION
 AND BOARD MEMBERS



Board(s)/Commission(s) for which
 you would like to be considered
 (in order of preference).

<i>DDA, Harbor Commission, Planning Commission, Village Council.</i>

Name _____

Email * _____

Address _____

Home phone _____

Cell phone _____

*email is the preferred method of contact; please provide
 if available

Is this an application for reappointment? (Y/N) _____

Are you an Village resident? (Y/N) _____

Are you an Township resident? (Y/N) _____

Brief Statement regarding your interest in serving on this board or commission

Employment Experience (If a resume has been attached, please indicate):

Educational Background and Other Special Skills

Briefly state your qualifications for this appointment

Do you know of any conflicts of interest or any reason you should not receive this appointment?

If "yes" please explain.

Are you able to attend year-round regularly scheduled meetings? Yes ____ No ____

Have you been convicted of, or pled guilty or no contest to, an offense against the law, or are there any felony charges pending against you? Yes ____ No ____

If "yes" please explain:

I _____ (print name), hereby certify that the information contained in this application is true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any misrepresentation, falsification, or omission of information on this application or on any document used to secure appointment shall be grounds for rejection of this application or immediate discharge if I am appointed, regardless of the time elapsed before discovery. I further understand that all applicants selected to serve are may be subject to a background check including criminal history, drivers record, and Michigan Sex Offender Registry.

Please return to: Village Office
222 N. Center St.
Sebewaing, MI 48759

Signature _____

Date _____

Form can be emailed to office@sebewaingmi.gov
Fax form to (989)883-9367