

TOWN OF STEVENSVILLE APPLICATION – COUNCIL MEMBER

APPLICANT INFORMATION									
Last Name		First		M.I.	Date				
Street Address									
City				State			ZIP		
Phone				E-mail Address					
Date Available									
Do you live in the Ward where the Council Seat Vacancy Exists? Yes ____ No ____ [Reference 7-4-4112(3) MCA]									
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	To hold public office in Montana you must be a citizen of the United States. Reference 7-4-4104 MCA. Residency requirement Reference 7-4-4401 MCA and Age requirement specified per the Montana Constitution Article IV Section 2 and 4.						
Are you at least 18 years of age?	YES <input type="checkbox"/>	NO <input type="checkbox"/>							
Have you been a resident of the Town of Stevensville for at least 60 days?	YES <input type="checkbox"/>	NO <input type="checkbox"/>							
EDUCATION INFORMATION:									
REFERENCES									
<i>Please list three professional references. Two should be employer references</i>									
Full Name				Relationship					
Company				Phone	()				
Address									
Full Name				Relationship					
Company				Phone	()				
Address									
Full Name				Relationship					
Company				Phone	()				
Address									
PREVIOUS EMPLOYMENT									
Company				Phone	()				
Address				Supervisor					
Job Title									
Duties and Responsibilities									
From		To		Reason for Leaving					
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>				
PREVIOUS EMPLOYMENT CONTINUED ON NEXT PAGE									

PREVIOUS EMPLOYMENT CONTINUED

Company		Phone	()
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Address		Supervisor	
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Job Title	
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Responsibilities	
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From		To		Reason for Leaving	
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May we contact your previous supervisor for a reference?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
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Company		Phone	()
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Address		Supervisor	
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Job Title	
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Responsibilities	
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From		To		Reason for Leaving	
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May we contact your previous supervisor for a reference?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
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WHY DO YOU WANT TO SERVE AS A COUNCIL MEMBER FOR THE TOWN OF STEVENSVILLE?

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WHAT QUALIFICATIONS DO YOU HAVE THAT MAKE YOU THE BEST CANDIDATE TO SERVE AS COUNCIL MEMBER FOR THE TOWN OF STEVENSVILLE?

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PLEASE REFER TO CHAPTER 2, ARTICLE 3 OF THE STEVENSVILLE MUNICIPAL CODE FOR DUTIES AND RESPONSIBILITIES OF A TOWN COUNCIL MEMBER. COUNCIL MEMBER'S DUTIES INCLUDE ATTENDING REGULAR AND SPECIAL COUNCIL MEETINGS, PUBLIC HEARINGS, SITTING ON BOARDS, ASSISTING IN THE DEVELOPMENT OF THE TOWN BUDGET, IMPLEMENTING THE BUDGET, ADOPT RESOLUTIONS, ORDINANCES, ADDRESSING POLICIES FOR THE TOWN AND ASSISTING IN RESOLVING ISSUES RELAVENT TO THE TOWN. DO YOU HAVE THE TIME TO DEDICATE TO THESE DUTIES AS REQUIRED?

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I certify that my answers are true and complete to the best of my knowledge.

SIGNATURE _____ DATE _____