Village of Kingsley

APPLICATION FOR BOARD/COMMITTEE

Date of Application:

BOARD/COMMITTEE A	PPLYING FOR:				
Social Security No.	Last Name	First		V8-12/10-65-1-10	Middle Initial
Address	City	State			Zip
County of Residence	Township	Telephone:	(Home)	(Work)	
EMPLOYMENT HISTOR	RY: (list most curren	nt first)			
Employer/Address/Telephone #			Position Held		Employed From/To
SERVICE ON OTHER C	OMMITTEES: Please	list other gov	ernmental/communi	ty boards and	d committees on which
you have served:					
Please describe your	Interest in this Boar	d/Committee	and how you feel yo	our expertise	and contribution wou
benefit same:					