

TOWN OF MARION
TALENT BANK APPLICATION FOR APPOINTMENT or REAPPOINTMENT
TO BOARD, COMMISSION, OR COMMITTEE

Name _____

E-Mail _____

Address _____

Phone _____

Mailing Address _____

The above named individual is requesting consideration for Appointment/Re-Appointment as follows: Board, Commission, or Committee being applied for:

What previous volunteer experience do you have that is related to the position applied for?

What previous Town positions have you held?

What is your educational background?

Tell us about your job history for the past 10 years:

Tell us about any Professional or Civic Organizations you are involved in:

Briefly describe why you believe that you would be an asset to the above Board/Commission/Committee:

Are you a year-round Marion Resident? Yes _____ No _____

Are you a registered voter in the Town of Marion? Yes _____ No _____

How often would you be available to attend meetings?

Weekly _____ Twice per Month _____ Monthly _____

Might any actions taken by this Board/Commission/Committee directly affect you (or your employer)?

Yes _____ No _____

Do you believe that there would be any conflict of interest if you were appointed to this Board/Commission/Committee?

Yes _____ No _____

Applicant Signature

Date