

TUSCOLA COUNTY
BOARDS & COMMISSIONS APPOINTMENT APPLICATION

Print Form

Please return this questionnaire to the County Clerk's Office, Attention: Appointments Division, 440 N. State St., Caro MI 48723; by email to appoint@tuscolacounty.org ; or by fax at (989) 672-4266
Please submit your resume with this application.

Boards/Commissions for which you would like to be considered:

Boards/Commissions for which you would like to be considered:

First Name* Middle Initial* Last Name*

Have you ever used, or have you ever been known by any other name? Yes No

If yes, provide names and explain:

Home Address City Zip

Township County

Employer Name:

Employer Address City Zip

Position Title

Work Number* Home Number* Cell Number
(10 digit) (10 digit) (10 digit)

Email _____ (email is the preferred method of contact, please provide if available)

Are you a United States Citizen? Yes No

EDUCATION (Include degree and dates; if answered in full on your attached resume, please indicate):

EMPLOYMENT EXPERIENCE (if answered in full on your attached resume, please indicate):

Do you hold any professional licenses? If so, please include numbers:

What special skills could you bring to this position?

Previous government appointments:

Please provide us with the names of your:

State Senator

State Representative

County Commissioner

The following **optional** information is elicited in order to ensure that this administration considers the talent and creativity of a diverse pool of candidates. In addition, specific backgrounds or qualifications are legally required for appointment to some boards and commissions. You may, therefore, wish to provide this information in order to ensure that you are considered for relevant boards and commissions.

Age Political Affiliation Military Service

Spouse or Partner's Name

CONSENT AND CERTIFICATION

I, (please 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 employment shall be grounds for rejection of this application or immediate discharge if I am employed, regardless of the time elapsed before discovery.

Signed By _____