THREE RIVERS CITIZEN'S INTEREST FORM FOR THE CITY COMMISSION THIRD DISTRICT

The following questionnaire is designed to obtain specific information as to your interest and qualifications for serving on the City Commission. Please take the time to complete the questionnaire and return it to the City Clerk. If you have any questions, please contact a City Commissioner, the City Manager, or the City Clerk. Feel free to attach additional comments or resume information that you may wish to submit. Please print or type the information.

	DATE
NAME	HOME PHONE
HOME ADDRESS	
EMAIL ADDRESS	
EMPLOYMENT (FIRM & OCCUPATION) _	
BUSINESS ADDRESS	
TELEPHONE (WORK)	MAY WE CONTACT YOU AT WORK
AREA OF SPECIAL KNOWLEDGE	
PRESENT SERVICE ACTIVITIES (i.e., Ch	HURCH, SCOUTING, CIVIC, ETC.)
INTERESTS	

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Return form to:	BY: JANUARY 13, 2017 BY 12pm
Signature (Full Written Name)	Date of Signature
PLEASE CAREFULLY READ THE FOLLOW I request that any criminal court record(s) may or from any other means which you may have such court records of convictions. I hereby wat against you, your department, or court, or any your furnishing such records. I also agree to he suffered from the release of this information be information as well as the firm authorized to re-	y be obtained from an examination of my files, and may be released to the bearer, stating nive any and all rights which I may have of your officers or employees by reason of nold harmless in the event of damages outh the department and court releasing such
MAIDEN NAMES, NICKNAMES	STATE ISSUED ID NUMBER
PRINT FULL NAME	DATE OF BIRTH
AS AN INDIVIDUAL INTERESTED IN SERVING REALIZE THAT THE FOLLOWING INFORMATION PERMISSION TO REQUEST ANY CRIMINAL REC ON AN ADVISORY BOARD/COMMISSION.	N WILL PROVIDE THE CITY WITH MY
What special experience or education of Commission?	do you have for serving on the

333 West Michigan Avenue Three Rivers, MI 49093