



BOARD, COMMISSION, OR COMMITTEE CANDIDATE APPLICATION

(REFER TO POLICY 10)

The County of Polk provides opportunities for citizens to serve on various boards, commissions, or committees. All Applicants must be resident citizens and qualified voters. Your application will be held for 12 months for consideration by the County Board as appointments are required. Your interest is greatly appreciated.

Personal Information (Please print legibly):

Should you be appointed to a Board, Commission, or Committee, the information that you provide in this **Personal Information** section will be disclosed to the members of the County Board, members of the press and citizens. If there is any information that you do not wish to disclose, please write **DND for DO NOT DISCLOSE** next to that data.

Name:	Employer:
Home Address:	Business Address:
City/State/Zip:	City/State/Zip:
Home Phone:	Business Phone:
Cell Phone:	Business Fax:
Personal Fax:	Business Email:
Personal Email:	Best method of contact 8a-5p, M-F:
Spouse's first/last name:	Best method of contact nights/weekends:
Emergency Contact Name:	Voter Registration Number:
Emergency Contact Phone:	Are you at least 18 years old? ___ yes ___ no
Month and Day of Birth (MM/DD):	
County of Polk resident for _____ years, _____ months	

Is there anything in your **employment background, education, prior board, commission, or committee service, civic or community work, and/or other special qualifications** that would serve you in this position? If additional space is needed, please attach a separate piece of paper. Resumes are acceptable.

How would you use this experience to benefit the County?

1. Have you ever served the County of Polk in any capacity? ___ Yes ___ No

If yes, please explain _____

2. Are you currently a member of a County Board, Commission, Committee or Authority? ____Yes ____No
If yes, please explain _____

3. Do any of your immediate relatives or business associates serve the County of Polk in any capacity?

____Yes ____No If yes, please explain _____

4. Are you able to attend day time meetings? ____Yes ____No

5. Are you able to attend evening meetings? ____Yes ____No

Check the appropriate box(es) for the boards, co boards, commissions, or committees on which you are willing to serve or please number 1, 2, and 3 (limit of 3) the Boards, Commissions, or Committees on which you would like to serve:

- | | |
|-----------------------------------|--------------------------------|
| Board of Health | Golden Age Manor |
| Council on Aging and ADRC | Highway |
| Ext., Lime, Land Conservation | Human Services |
| Finance | Library |
| Renewable Energy | Land Information |
| Property, Forestry & Recreational | Personnel |
| Board of Adjustments | Public protection and Judicial |

Please tell us why you are interested in serving on the Board(s), Commission(s), or Committee(s):

- I affirm that I am qualified to vote.
- This application will remain on file for 1 year from the date of application.
- Open Records Law, information provided on this application may be available to the public upon request.

Applicant Signature

Date

Please mail or hand-deliver your completed application to: **Polk County Government Center, Department of Administration, 100 Polk Plaza, Ste. 220, Balsam Lake, WI 54810**

For more information, please call Department of Administration at 715-485-9212.