

**CITY OF WATKINS
APPLICATION FOR APPOINTMENT**

Board / Committee / Commission applying for: _____

Name: _____

Address: _____

Phone Number: _____ Cell Phone Number: _____

Number of years lived in Watkins: _____

Are you presently serving on a City of Watkins Board / Committee: Yes No

Which Board / Committee: _____ From: _____ To: _____

Have you served on a City of Watkins Board / Committee: Yes No

Which Board / Committee: _____ From: _____ To: _____

Which Board / Committee: _____ From: _____ To: _____

What types of experiences or education have you had that would help you be an effective Board / Committee member?

ATTENDANCE:

Are you aware of the importance of regular meeting attendance, including the time commitment involved in preparing for meetings, and do you feel you have the time available to be an active participant? Yes No

Comments: _____

(OVER)

CONFLICT OF INTEREST:

A conflict may exist when you have a particular interest in an issue. I wish to disclose the following potential conflicts of interest that may or will arise if I become a member of this Board / Committee.

Signature

Date

The selection process will vary according to the number of applicants and vacancies.

THANK YOU FOR YOUR INTEREST IN SERVING ON A BOARD / COMMITTEE / COMMISSION.

PLEASE MAIL OR RETURN THIS FORM TO THE CITY OF WATKINS CITY HALL.

Watkins City Hall
PO Box 306
Watkins, MN 55389

Office Use
Appointed to: _____
Date appointed: _____
Term length: _____