CITY OF CIRCLEVILLE

Application for City Board or Commission

Thank you for your interest in serving on a board or commission for the City of Circleville. Volunteers are always needed for current and future openings. Please indicate which board(s) or commission(s) you have interest. ____Historic District Review Board _____Planning and Zoning Commission __Civil Service Commission ____Pickaway County Health District Board ____Records Commission Downtown Revitalization District ___Board of Zoning Appeals Park Board Joint Economic Development District Tree Commission Circleville-Pickaway Lease Oversight Board (OhioHealth) Full Legal Name: _____ Current Address: ___ Email Address: (All boards/commissions, with the exception of the tree commission, require city of Circleville residency) Home Phone: Cell Phone: Cell Phone: Occupation: _____ Employer: ____ Have you ever been a member of any City board or commission, or employed by the City of Circleville? If yes, in what capacity? _____ Are you related to any city of Circleville employees or have other potential conflicts that could interfere with your work as a board or commission member? If yes, please describe: _____ Do you have any volunteer experience? If so, please describe: QUALIFICATIONS: Please explain why you want to be a board or commission member, and list any skills or experiences that would benefit your chosen board or commission:

Signature of Applicant Thank you for your application. If you have any questions, please contact the Department of Human Resources.

Date