

**ALLEGAN COUNTY
COMMITTEES, BOARDS & COMMISSIONERS**

CONSIDERATION OF APPOINTMENT/ELECTION

Name _____	Date _____
Address _____	Home Tel. _____
_____	Business Tel. _____
_____	Mobile Tel. _____
	email _____

Seeking appointment/election to: _____

If applicable, which group or interests would you represent if appointed or elected: _____

Are you a citizen of the United States? _____

Are you a resident of Allegan County? _____

Are you available for interview by the Board of Commissioners or its designee? _____

Please state briefly why you desire to be appointed: _____

Please state any specific qualifications you possess which would be beneficial to the appointment you desire such as: Special skills, interests, education, experience, membership in specific groups. (Attach additional sheets if necessary.)

Signature of Applicant

Please return to:
Allegan County Administration 3283 –
122nd Avenue
Allegan, MI 49010
or Fax 269-686-5331
Email:
Administration@allegancounty.org