



The Oldest City in Minnesota

**APPLICATION FOR APPOINTMENT TO
CITY BOARD OR COMMISSION**

If interest lies in more than one choice, indicate (by order of preference) which commission/ board you are interested in (1, 2, 3, etc.):

- | | |
|--|--|
| <input type="checkbox"/> Ambulance Commission (3 yr. term) | <input type="checkbox"/> Park Board (3 yr. term) |
| <input type="checkbox"/> Civil Service Commission (3 yr. term) | <input type="checkbox"/> Planning Commission (3 yr. term) |
| <input type="checkbox"/> Fire Commission (3 yr. term) | <input type="checkbox"/> Street Commission (3 yr. term) |
| <input type="checkbox"/> Heritage Preservation Commission (3 yr. term) | <input type="checkbox"/> Utilities Commission (3 yr. term) |
| <input type="checkbox"/> Library Board (3 yr. term) | <input type="checkbox"/> Wabasha Port Authority (6 yr. term) |
| <input type="checkbox"/> Lodging Tax Committee (3 yr. term) | |

NAME: _____

Address: _____

Email Address: _____

Phone: (home/cell) _____ (work) _____

Employer: _____ Occupation: _____

How many years have you lived in Wabasha? _____

STATEMENT OF INTEREST:

Please explain why you would like to serve on the board or commission selected above:

EDUCATION AND PROFESSIONAL EXPERIENCE:

Describe your educational and professional experience or skills that qualify you to serve on this board or commission.

CIVIC AND COMMUNITY ACTIVITIES:

Describe past or present civic and/or community activities that may be relevant in qualifying you to serve on this board or commission.

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: _____

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 or commission.

_____ Date: _____
Signature

The selection process will vary according to the number of applicants and vacancies, and may not include interviews with all candidates.

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

DATA PRACTICES ADVISORY

We are required to provide the following information to you. Under Minnesota law, some of the information requested above is public information, which must be provided to anyone who requests it. Some of it is classified as private information, which is not generally available to the public. However, all of the information will be used by the City Council in determining whether you should be appointed to a Board or Commission. Therefore, the information will be provided to the City Council in a public forum and will be reviewed in public. It will therefore be part of the public record, which will be available to anyone. Failure to provide the requested information may result in your not being considered for appointment. If you have concerns about providing any of the requested information, please contact City Hall at 651-565-4568.

Return application to:
City of Wabasha
Attn: City Clerk
900 Hiawatha Dr. E
PO Box 268
Wabasha MN 55981

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