

**City of Troy
 City Clerk's Office
 500 West Big Beaver
 Troy, Michigan 48084
 (248) 524-3316**



(RETURN COMPLETED APPLICATION TO ABOVE ADDRESS)

APPLICATION FOR BOARDS AND COMMITTEES

Thank you for your interest in serving on a Board or Committee. The purpose of this form is to provide the Mayor and City Council with basic information about residents considered for appointment.

(PLEASE PRINT OR TYPE)

Date: _____

Name (Mr/Mrs/Ms): _____ Phone: _____

Address: _____ City/Zip _____

Employer: _____ Phone: _____

Address: _____ City/Zip _____

How long have you lived continuously in the City of Troy? _____ E-Mail: _____

Are you a registered voter in the City of Troy? Yes No **(Verified by Clerk's Office)**

Are you affiliated with any political party? Yes No

Are you a graduate of Troy's Citizen Academy? Yes No

Are you related to an elected official or employee of the City of Troy? Yes No

Insert your relationship to elected official or employee of the City of Troy: _____

Have you ever been convicted for anything other than a minor traffic violation? Yes No

Select **ONLY three (3)** boards or committees for which you would like to apply for in the order of your preference: 1=First Choice, 2=Second Choice, 3=Third Choice:

- | | |
|--|---|
| <ul style="list-style-type: none"> _____ Animal Control Appeals Board _____ Brownfield Redevelopment Authority _____ Charter Revision Committee _____ Downtown Development Authority (DDA) _____ Election Commission** _____ Liquor Advisory Committee** _____ Municipal Building Authority _____ Personnel Board _____ Traffic Committee _____ Zoning Board of Appeals (ZBA)** | <ul style="list-style-type: none"> _____ Board of Review _____ Building Code Board of Appeals _____ Civil Service Commission (Act 78)** _____ Economic Development Corporation _____ Historic District Commission _____ Local Development Finance Authority (LDFA) _____ Parks & Recreation Board _____ Planning Commission** _____ Retirement System Board of Trustees & _____ Retiree Health Care Benefits Plan & Trust |
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****Contact the City Clerk's Office for additional application requirements
 NOTE: YOUR APPLICATION WILL BE KEPT ON FILE FOR 2 YEARS.**

Professional Qualifications and/or Work Experience: _____

Community Activities and/or Other Experience: _____

Educational Background: _____

References (Please list name and address): _____

Indicate reasons for desiring to serve: _____

Applicant's Signature: _____

FOR OFFICE USE ONLY

Received by: _____ Date: _____

- Confirmed voter status Confirmed current *Full Disclosure Statement* on file
- Confirmed compliance with applicable federal, state and local statutes
- Confirmed receipt of Affidavit for Election Commission

Confirmed by: _____