CITY OF KETTERING

APPLICATION FOR APPOINTMENT TO:

( ) Arts Council
( ) City Council
( ) Civil Service Commission
( ) Community Relations Board
( ) Partners for Healthy Youth Advisory Board
( ) Property Maintenance Board
( ) Parks, Recreation and Cultural Arts Advisory Board
( ) Personnel Appeals Board
( ) Planning Commission
( ) Plumbers' Registry Board
( ) Sister City Committee
( ) Tax Appeals Board
( ) Volunteer Advisory Council
( ) Volunteer Celebration Committee
( ) Zoning Appeals Board
( ) _____

TO: **COUNCIL OF THE CITY OF KETTERING, OH:** **DATE**:_____

Name:_____ Home Telephone:_____

St. Address:_____ Zip Code: _____

E-Mail Address: _____

Employer:_____ Business Telephone:_____

St. Address:_____ Zip Code: _____

City & State:_____ Title:_____

Educational Background: Length of Residence in Kettering:_____

High School:_____

College or Training:_____

Previous Employers	**Title**	**Years**

Civic Participation, Interests & Activities:_____

My qualifications for this appointment:_____

Reasons I would like to be considered:_____

Please feel free to attach additional information.

Signed:_____