

Madison County Boards & Commissions Appointment Application



Contact Information

Name	
Street Address	
City ST ZIP Code	
Mailing Address <i>if different from above</i>	
Phone 1	
Phone 2	
E-Mail Address	
Length of Residence in Madison County	

Indicate on which boards and commissions you are willing to serve Madison County

- | | |
|---|---|
| <input type="checkbox"/> Board of Adjustment | <input type="checkbox"/> Conservation Board |
| <input type="checkbox"/> Board of Health | <input type="checkbox"/> Historic Preservation Commission |
| <input type="checkbox"/> Board of Review | <input type="checkbox"/> Regional Housing Authority |
| <input type="checkbox"/> Civil Service Commission | <input type="checkbox"/> Veterans Affairs Commission |
| <input type="checkbox"/> Compensation Commission | <input type="checkbox"/> Zoning Commission |

List Previous Board Positions (*church, city, school, professional, etc.*) & Dates of Service

Special Skills or Qualifications

Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports.

Indicate why you would like to be appointed to a board or commission

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Two references other than family members

Name 1	
Relationship	
Phone	
Name 2	
Relationship	
Phone	

Questions

Do you sell to, or are you in any manner a part of any contract to, furnish supplies, materials, or labor to Madison County? YES NO

If YES, explain: _____

Have you ever been employed by Madison County? YES NO

If YES, list dates of employment and positions held: _____

Do you have relatives employed by Madison County? YES NO

If YES, please write name and relationship: _____

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am appointed to a board or commission, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

Name (printed)	
Signature	
Date	

Our Policy

Madison County appreciates your interest in serving the community and welcomes your application. We are committed to providing equal opportunity for citizen involvement. If you have any questions, please contact the Board of Supervisors at 515.462.3225 or the County Auditor at 515.462.3914. Please submit your completed application to the Madison County Auditor, PO Box 152, Winterset IA 50273 or skaster@madisoncounty.iowa.gov

Thank you for completing this application and for your interest in serving Madison County residents.