



**CITY OF MOSINEE
BOARDS & COMMISSIONS
MEMBERSHIP APPLICATION**

Name: _____

Address: _____

Home Phone: _____

Work Phone: _____

E-mail Address: _____

Current or Former Occupation: _____

How Many Years Have You Resided in the City of Mosinee? _____

I am interested in serving on the following City of Mosinee Board or Commission:

What is your understanding of the role and responsibility of this Commission (attach additional sheets if needed)?

Please briefly describe any experience and/or background that you may have which may be beneficial to this Board or Commission (attach additional sheets if needed):

Please briefly describe why you would like to serve on this Board or Commission (attach additional sheets if needed):

Additional information that you feel is pertinent (attach additional sheets if needed):

If not appointed to the Board or Commission indicated above, would you be willing to serve on another City Board or Commission? _____ If so, please indicate which Board or Commission:

Signature: _____ Date: _____

Return application to: Mayor's Office
City of Mosinee
225 Main Street
Mosinee, WI 54455

OFFICE USE ONLY

DATE APPLICATION RECEIVED: _____

APPOINTED: YES _____ NO _____ DATE: _____

TERM EXPIRATION DATE: _____

(Circle One)

Original Appointment

Reappointment

Complete Vacant Term