

**City of Coldwater**  
**Application for Consideration for Appointment to**  
**Citizen Boards and Commissions**

*(Applications are kept on file for one year from date of completion.)*

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

Telephone (Home) \_\_\_\_\_ (Work) \_\_\_\_\_

I wish to be considered for appointment to the following citizen board(s) or commission(s). (If selecting more than one board/commission, indicate order of preference — “1” being first choice.)

<input type="checkbox"/> Property Maintenance Code Board of Appeals	<input type="checkbox"/> Housing Commission
<input type="checkbox"/> Board of Public Utilities	<input type="checkbox"/> Library Board
<input type="checkbox"/> Board of Review	<input type="checkbox"/> Local Development Finance Authority and Brownfield Redevelopment Auth. Boards
<input type="checkbox"/> Cable Television Commission	<input type="checkbox"/> Local Officers Compensation Commission
<input type="checkbox"/> Community Development Advisory Comm.	<input type="checkbox"/> Municipal Building Authority
<input type="checkbox"/> Construction Board of Appeals	<input type="checkbox"/> Planning Commission
<input type="checkbox"/> Downtown Development Authority	<input type="checkbox"/> Recreation Board
<input type="checkbox"/> Economic Development Corporation	<input type="checkbox"/> Zoning Board of Appeals
	<input type="checkbox"/> Other _____

Are you over 21 years of age?                       Yes                       No  
Are you a resident of the city of Coldwater?                       Yes                       No  
Are you a registered voter in the city of Coldwater?                       Yes                       No

Educational Qualifications: \_\_\_\_\_  
\_\_\_\_\_

Place of Employment: \_\_\_\_\_

Type of Work Performed: \_\_\_\_\_

Other experience which would assist you in performing the duties of a board/commission member:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Return completed form to:** Mayor’s Office, One Grand St., Coldwater, MI 49036