

City of Walled Lake Application Form for Boards & Commissions

Name:	Date	e:	
Address:			
A completed application is required from any person seeking Commissions to determine the qualification of each applicant process and nomination by the Mayor, it shall be the City Cou	Upon completion of the ap	plication and	d review
		Circle	e One:
Are you over 18 Years of Age?		Yes	No
Citizen of the United States?		Yes	No
Are you in Default to the City?		Yes	No
Have you ever been dismissed from or asked to rest If yes, please explain:	ign from any position?	Yes	No
Telephone:	Email:		
Occupation:	Employer:		
Are you or any members of your family Elected Of If so, please list who:	ficials of the City?	Yes	No
List in order of preference the position(s) you ar you would accept:	e interested in and ap	pointmen	ts which
1			
2			
3			
Describe why you are interested in a Board or Com Please provide details on a separate sheet:	mission position:		

Are there any other experiences, skills or qualifications you feel would especially qualify you for appointment to a Board or Commission with the City of Walled Lake?

(Applicants seeking a Mayor's nomination are invited to submit resumes or other pertinent information in written form.)

List each position you have held with the City of Walled Lake, if any.

MILITARY SERVICE RECORD:

Were you in the US Armed Forces?	What Branch?
Rank at Discharge:	Type of Discharge?

RECORD OF EDUCATION:

	F	rom		То
Name, City & State of Educational Institution	Mo.	Yr.	Mo.	Yr.
Degrees Earned	If No Degi	ee, Credits Ea	arned	Overall GPA

	Fi	rom		То
Name, City & State of Educational Institution	Mo.	Yr.	Mo.	Yr.
		~		
Degrees Earned	If No Degr	ee, Credits E	arned	Overall GPA

	Fi	rom		То
Name, City & State of Educational Institution	Mo.	Yr.	Mo.	Yr.
D	ICN. D			O
Degrees Earned	If No Degr	ee, Credits E	arned	Overall GPA

PERSONAL:

- 1. How long have you lived in Walled Lake?
- 2. Previous Residence:

		Circle	e One
3.	Have you ever been charged with a misdemeanor or felony? If so, when, where and nature of offense on separate sheet?	Yes	No
4.	Have you ever been convicted of a criminal offense? If so, please provide details on a separate sheet:	Yes	No
5.	Are there any felony charges pending against you? If so explain on a separate sheet:	Yes	No

REFERENCES:

List three (3), including name, address, and telephone number. At least two must be city residents.

1. Name:	Address:	Phone #
2. Name:	Address:	Phone #
3. Name:	Address:	Phone #

All sections Must Be Completed:

I understand that false statements on this application may be grounds for removal from any office to which I may be appointed.

Signature:	
e	

Received by:	 Date:	

Disposition:

Authority: City of Walled Lake Charter, Section 4.5 (g) Duties of Mayor

(g) It shall be the duty of the Mayor to nominate qualified persons to the Council and various Boards and Commissions, and it shall be the Council's duty to accept or reject those nominations.

City of Walled Lake Application Form for Boards & Commissions

PLEASE READ AND SIGN BELOW

I certify that the facts set forth in this Application for Appointment to Boards and Commissions, in my resume and in the materials I have submitted are true and complete. I hereby authorize the City of Walled Lake (hereinafter "The City"), to contact all my former and current employers, educational institutions, and other references I have provided and any other person or entity, regarding me and my performance record and work, academic and/or military experience and driving record (if applicable). I also hereby release the City and its employees, City Council, elected officials, and agents and all of my former and current employers, educational institutions, and other references I have provided and others contacted by the City, from any and all liability and damages for releasing or using information concerning me and my performance record and work, academic and/or military experience, and driving record (if applicable).

I also hereby waive any right under the Bullard-Plawecki Right to Know Act, 1978 PA397, to receive written notice from the City or any former or current employer, that disciplinary reports, letters of reprimand, or other disciplinary action taken against me while employed will be or have been disclosed to a third party or entity. I also understand that the City may, in its sole discretion, conduct or have conducted by an individual or entity of its choice, a conviction-only-criminal background history on me. I hereby consent to this search being conducted and to disclosure of the results of that search by the individual or entity conducting the search to the City. I hereby release the individual or entity conducting the search, the City and its employees, City Council, elected Officials and agents, form any and all liability, claims and damages, including but not limited to, claims for releasing or using any information revealed as a result of this search. I also understand and acknowledge that false information provided by me or a criminal conviction will result in disqualification from office.

Print Name:

Signature:

Date:	Notary Signatura:	
Date:	Notary Signature:	

Commission Expires: