1836

SWANCREEK TOWNSHIP TRUSTEES

FULTON COUNTY, OHIO

APPLICATION FOR A PUBLIC COMMITTEE, COMMISSION, OR BOARD 5565 County Road D Delta, Ohio 43515

	m or you can submit i				
•	ab from one field to the ne	ext			
NAME					
Fir	rst	Middle			Last
ADDRESS					
ADDRESS					
	Street		City/State		Zip Code
TELEPHONE					
	Home		Cell		
EMAIL ADDRESS					
APPOINTMENT APPLYING FOR:					
CONTACTS:					
	o any current employe	ee of Swancreek Tov	vnship	(Circle) NO	YES
If yes give name				(00.0)	
and position.					
· ·	o any member of the o	committee, commiss	sion, or bo	ard for which	you are applying?
(Circle) NO	YES				
If yes give name and position.					
3. Do you serve on a (Circle) NO	any other public or no YES	t-for- profit commit	tee, comm	ission, or boar	rd?
If yes, please identify					
EDUCATION:					
High School			Graduatio	on Date	
Post High School Edu	ucation				1

MILITARY HISTO				
Branch of Service		Dis	scharge Date	
Highest Rank				
EMPLOYMENT H	ISTORY:			
Present or last employer				
Your title and duties				
Dates of Employmen	t			
List relevant work ex	perience:			
REFERENCE: List 3 persons not relative to the second relative to the	ated to you w	no have definite personal knowle	edge of your qualifica	tions for this position
Name		Address	Phone number	
STATEMENT: Please provide a brief	f statement as	to why you feel you are qualified	d for this appointmen	ıt.
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Please include any other information here that you feel would be of importance to the township trustees in the
selection process.
STATEMENT:
Are you aware of any circumstances that exist that would create a conflict of interest or the appearance of a
conflict of interest if you are appointed to this committee, commission, or board?
(Circle) NO YES
(Circle) NO YES If yes , please explain:
If yes, please explain:
If yes, please explain: I certify that the statements made by me in this application are true, complete, and correct to the best of my
If yes, please explain:
If yes, please explain: I certify that the statements made by me in this application are true, complete, and correct to the best of my knowledge and belief and are made in good faith.
If yes, please explain: I certify that the statements made by me in this application are true, complete, and correct to the best of my
If yes, please explain: I certify that the statements made by me in this application are true, complete, and correct to the best of my knowledge and belief and are made in good faith.

Complete and Email, Fax, or Mail to: Swancreek Township Trustees 5565 County Road D Delta, Ohio 43515

Phone: 419-822-4371 Fax: 419-822-9609

Email: chris@swancreektwp.org