



CITY OF BELLE PLAINE
APPLICATION FOR COMMISSION APPOINTMENT

Return the completed application to the Belle Plaine Government Center
218 North Meridian Street, P.O. Box 129, Belle Plaine, MN 56011
Phone 952-873-5553 - Fax 952-873-5509

Commission(s) applying for: _____

[] New Appointment [] Re-Appointment

Personal Information

Name _____

Street Address _____

City, State, Zip _____

Email _____

Phone _____ Are you 18 years of age or older? [] Yes [] No

How long have you resided in Belle Plaine ? _____

List any property you own in Belle Plaine (other than residence): _____

Occupation

Present Employer _____ Business Phone _____

Employer Address _____

Position Title _____

Education

Post Secondary Course Work Completed

Name of Institution Dates Attended Degree/Credits Major

List Relevant Experience

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Please explain what will you contribute to the community if appointed to a City Commission.

As a Commission member, what issue(s) may cause a conflict between civic responsibility and personal/professional interests?

Please explain if your current employer would object to your involvement on a Commission.

Are there any scheduling conflicts with regularly-scheduled meetings that we should be aware of?

No Yes If so, explain _____

May we contact your present employer? Yes No

References - please list three persons (not related) you have known at least one year.

Name	Address	Phone No.	Years Known
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Physical Record

Do you have physical limitations preventing you from serving for any position for which you are being considered?

No Yes

If yes, what may be done to accommodate your limitation?

In case of an emergency, please notify (name, address, phone number)

Signature _____ Date _____

Selection process may vary according to number of applicants and openings and may not include interviews with all candidates.