

APPLICATION FOR LEWISTOWN BOARDS AND COMMISSIONS

PLEASE NOTE: All APPLICATIONS ARE INCLUDED IN COMMISSION PACKETS AND PUBLISHED ON THE CITY WEBSITE.

DATE:	*APPLICATION DEADLINE:
BOARD, COMMISSION OR COMMITTEE APPLING FOR:	
NAME:	HOME PHONE:
STREET ADDRESS:	BUSINESS PHONE:
ZIP CODE:	EMAIL ADDRESS:
MAILING ADDRESS:	IN WHICH WARD DO YOU RESIDE _____ (1-3)
ZIP CODE:	
Are you a citizen of the U.S.A.? ___ Yes ___ No	Are you a registered voter? ___ Yes ___ No
How long immediately prior to this date have you been continuously a legal resident of the City of Lewistown? _____	
How long immediately prior to this date have you been continuously a legal resident of the State of Montana? _____	
PLEASE PROVIDE THE FOLLOWING INFORMATION (You may attach a separate sheet to this form.)	
Brief resume of your educational background.	
Current Occupation:	Current Employer:
Previous Community Service:	
PLEASE LIST TWO PERSONAL REFERENCES:	
Name:	Daytime Phone:
Address:	
Name:	Daytime Phone:
Address:	
What is your interest in serving on this board, commission or committee?	
Do you have special knowledge, interest or experience that would qualify you for a position on this board, commission or committee?	

*Please return you completed application to the City of Lewistown: 308 W Watson Lewistown 59457