

CITY OF PRIMGHAR, IOWA

APPLICATION FOR APPOINTMENT TO BOARDS AND COMMISSIONS

The City of Primghar appreciates your interest in serving the community and welcomes your application. Please complete all sections of this application. If you have any questions, please contact City Hall at (712) 957-2435 or by email at primghar@tcaexpress.net. The City of Primghar is committed to providing equal opportunity for citizen involvement.

Please indicate those Boards and/or Commissions on which you would be willing to serve by checking below:

<input type="checkbox"/> Board of Adjustment	<input type="checkbox"/> Planning & Zoning Commission
<input type="checkbox"/> Parks and Recreation	<input type="checkbox"/> Northwest Iowa Regional Housing Authority Representative

Name: _____ Date: _____
 Last First Middle

Address: _____
 Street City State Zip

Occupation: _____

Employer's Name & Address

Work Telephone No: _____ Hours which you can be reached at this number: _____
Home Telephone No: _____ Hours which you can be reached at this number: _____

Length of residence in Primghar: _____

Please list any previous Board membership positions (City, Church, School, Professional, etc.) and dates of service:

Please indicate below the reasons why you would like to be appointed to a Board or Commission and any specific skills or experience that you believe support your application.

Please list two references other than a family member:

Name: _____ Relationship: _____ Phone Number: _____

Name: _____ Relationship: _____ Phone Number: _____

Do you sell to, or are you in any manner a part to, any contract to furnish supplies, material, or labor to the City of Primghar? _____ If so, please list: _____

Have you ever been employed by the City? _____ If so, please list dates of employment and positions held.

Do you have relatives working for the City? _____ If so, please give name and relationship.

Are you being sponsored by a community organization(s)? _____ If so, please list the following and attach a confirmation letter from said organization:

Organization: _____ Chairperson: _____ Phone Number: _____

Applicant Signature: _____ Date: _____

Please mail completed application to City Hall at the following address:

**City of Primghar
P.O. Box 39
Primghar, Iowa 51245**