

CHICKASAW COUNTY BOARDS/COMMISSIONS APPLICATION FORM

Please Return To:

Chickasaw County Board of Supervisors

PO Box 311

New Hampton, IA 50659

Phone: 641.394.2100 Fax: 641.394.5541

Website: www.chickasawcounty.iowa.gov

Board/Commission Applying For: _____

Date: _____ E-mail Address: _____

Name: _____

Address: _____

Phone Number: _____ Alternate Phone: _____

This form assists the Board of Supervisors in evaluating the qualifications of applicants for appointment to a board or commission.

Place of employment and position (and /or activities such as hobbies, volunteer work, etc. that you feel may qualify you for this position):

The following questions will assist the Board of Supervisors in its selection.

How much time will you be willing to devote in this position?

Interest in Appointment: Describe in detail why you are interested in serving on a county board or commission. Include information about your background that supports your interest.

Contributions you feel you can make to the Board/Commission:

Direction/role you perceive of this Board/Commission:

In lieu of/in addition to the above, do you have any comments to add that may assist the Board of Supervisors in its selection?

Please provide two references who may be contacted on your qualification for this position.

Name	Address	Phone	Email	Relationship
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Pursuant to Iowa Code section 21.12(1), any “newly elected or appointed public official who is a member of a governmental body” must receive mandatory training on Open Meetings and Public Records law within 90 days of election or appointment or assuming the responsibilities of the office. Further information on this requirement can be found at <https://ipib.iowa.gov/> and training can be arranged through the County Auditor.

I certify that there is nothing that would prohibit me from serving on this board or commission.

Signature _____ Date _____