

## APPLICATION FOR VOLUNTEER SERVICE

Name:	Phone (cell):
Addres	ss: Phone (other):
E-mail:	:
Area(s)	<ul> <li>of Interest:</li> <li>Board of Zoning Appeals (BZA)</li> <li>Board of Water &amp; Sewer Charge Adjustment</li> <li>City Beautiful Commission (CBC)</li> <li>Community Reinvestment Area Housing Council</li> <li>Income Tax Board of Review</li> <li>Personnel Appeals Board</li> <li>Planning Commission (PC)</li> <li>Records Retention Commission</li> <li>Recreation Board</li> </ul>
Personal Information:	
1.	Occupation:
2.	Where Employed:
3.	Length of Residency in West Carrollton:
4.	Any previous experience in city government? $\Box$ Yes $\Box$ No
	If yes, please explain:
5.	Do you have a criminal record? If so, please explain:
6.	Why do you feel qualified for appointment?
Plea	Signature: Date: ase return completed application to Tracy Moore, Clerk of Council. Email to tmoore@westcarrollton.org

or mail completed form to City Manager's Office, 300 E. Central Ave., West Carrollton, OH 45449