



City of Moraine
Clerk of Council

4200 Dryden Road, Moraine, Ohio 45439 ♦ Phone 937/535-1005 ♦ Fax 937/535-1275

APPLICATION FOR APPOINTMENT
Boards and Commissions

Name: _____

Address: _____ **Zip:** _____

Phone: (Day) _____ (Evening) _____

1. On which board or commission would you like to serve?

- | | |
|--|--|
| <input type="checkbox"/> Board of Zoning Appeals (2 years) | <input type="checkbox"/> Planning Commission (2 years) |
| <input type="checkbox"/> Merit System Commission (2 years) | <input type="checkbox"/> Tree Board (2 years) |
| <input type="checkbox"/> Board of Parks & Recreation (2 years) | <input type="checkbox"/> CRHC (2 years) |

2. Are you a registered voter? Yes No

3. How long have you been a resident of the City of Moraine? _____

4. Have you served previously on a board or commission? Yes No
If yes, please list the board(s)/commission(s), including number of terms:

5. Please insert any additional information to be considered by Council:

Signature: _____ Date: _____