



# City of Holts Summit

213 S. Summit Drive/PO Box 429

Holts Summit, MO 65043

(573) 896-5600



## Board/Commission Application Form

Individuals serving on Boards or Commission play an important role in advising the Board of Alderman on matters of interest to our community and its future. When a vacancy occurs, an announcement of that vacancy will be posted. The Mayor and Board of Aldermen will review all applications. The appointment will be made at a formal Board of Alderman meeting. Appointees serve as unpaid volunteers.

Date: \_\_\_\_\_

Name of Board or Commission applying for: \_\_\_\_\_

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_ Cell: \_\_\_\_\_

Do you live within the corporate limits of Holts Summit?      Yes    or    No

If no, how close to the city limit? \_\_\_\_\_

How long have you been a resident of the Holts Summit area? \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Optional Questions (use back of application if necessary)

What experience and/or skills do you have that might especially qualify you to serve on this Board or Commission?

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What contributions do you feel you can make to this Board or Commission?

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I will attend meetings in accordance with the adopted policies of Holts Summit, Missouri. If at any time my business or professional interest conflict with the interest of the Commission, I will not participate in such deliberations.

References may be secured from the following individuals:

1. \_\_\_\_\_ Phone: \_\_\_\_\_

2. \_\_\_\_\_ Phone: \_\_\_\_\_

3. \_\_\_\_\_ Phone: \_\_\_\_\_

4. \_\_\_\_\_ Phone: \_\_\_\_\_

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Signature of Applicant

\*Please attach any additional information you feel is pertinent to your application.

Return completed application to: City of Holts Summit, PO Box 429, Holts Summit MO 65043

Revised 06.27.17