APPLICATION FOR APPOINTMENT

CITY OF KETCHIKAN BOARDS AND COMMISSIONS

NAME: _____
First Last Middle Initial

RESIDENCE ADDRESS: _____

MAILING ADDRESS: _____

CONTACT NOS: _____ _____
Home Work or Cell

EMAIL ADDRESS: _____

I am willing to serve as a member of the _____, and ask that my name be considered by the Mayor and Council for appointment.

_____
Signature

_____
Date

Please attach a personal resume or letter stating your interest. This application and attachments will be included in the City Council agenda packet, which is made available to the public.

Please return all applications to the Clerk's Office or by email:

City Clerk Office
334 Front Street
Ketchikan, AK 99901
clerk@ktn-ak.us

For office use only:

Received by _____

Date received _____

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