

**APPLICATION FOR
APPOINTMENT TO
ALPENA MUNICIPAL COUNCIL**

NAME: _____
(Please Print) (Last) (First) (Middle) (Maiden)

HOME ADDRESS: _____
(Number/Street) (City/Zip) (Telephone)

EMAIL ADDRESS: _____
(Home) (Work)

BUSINESS ADDRESS: _____
(Number/Street) (City/Zip) (Telephone)

I AM A CITIZEN OF THE UNITED STATES. [] Yes [] No

I AM AT LEAST 18 YEARS OLD. [] Yes [] No

I AM A REGISTERED VOTER IN THE CITY OF ALPENA. [] Yes [] No

I AM **NOT** IN DEFAULT TO THE CITY, SCHOOL DISTRICT, COUNTY, OR OTHER MUNICIPAL CORPORATION. [] Yes [] No

I HAVE LIVED IN ALPENA FOR _____ YEARS.

MILITARY HISTORY: *(include honors received)*

CIVIC ACTIVITIES *(office held, honors, etc.)*

LIST NAMES, ADDRESSES AND TELEPHONE NUMBER OF THREE REFERENCES NOT RELATED TO YOU:

EMPLOYMENT:

IF EMPLOYED, PRESENT POSITION:

(Name of employing firm/owner)

(Number/Street)

(City/State)

(Zip)

(Telephone)

FROM _____ TO _____

TITLE OF YOUR POSITION: _____

TYPE OF BUSINESS/ORGANIZATION: _____

BRIEF SUMMARY OF YOUR DUTIES AND RESPONSIBILITIES:

ADDITIONAL INFORMATION YOU WISH TO INCLUDE:

(Use separate sheet if necessary)

IF APPOINTED, DO YOU PREFER YOUR MAIL SENT : BUSINESS _____ RESIDENCE _____

EMAIL ADDRESS _____

I hereby certify that this form is true and accurate to the best of my knowledge.

(Signature)

(Date)

PLEASE RETURN TO: CLERK'S OFFICE
208 N. First Avenue
Alpena, MI 49707
annas@alpena.mi.us

Questions? Please call 989.3541721