

**DELAWARE COUNTY APPOINTED POSITION APPLICATION**

NAME: \_\_\_\_\_  
Last First Middle Initial

**Board/Commission Applying for (check one):**

- |  |   |
|--|---|
| <input type="checkbox"/> Delaware Area Transit Board                             | <input type="checkbox"/> Delaware City Airport Commission                                   |
| <input type="checkbox"/> Delaware County Board of Building Appeals               | <input type="checkbox"/> Delaware County Board of Developmental Disabilities                |
| <input type="checkbox"/> Delaware County Board of Zoning Appeals                 | <input type="checkbox"/> Delaware County Community Corrections Planning Board               |
| <input type="checkbox"/> Delaware County Convention and Visitors Bureau          | <input type="checkbox"/> Delaware County District Library Board                             |
| <input type="checkbox"/> Delaware County Finance Authority                       | <input type="checkbox"/> Delaware County Job & Family Services Community Planning Committee |
| <input type="checkbox"/> Delaware County Law Library                             | <input type="checkbox"/> Delaware County Public Defender Commission                         |
| <input type="checkbox"/> Delaware County Rural Zoning Commission                 | <input type="checkbox"/> Delaware Metropolitan Housing Authority                            |
| <input type="checkbox"/> Delaware-Morrow Mental Health & Recovery Services Board | <input type="checkbox"/> Mid-Ohio Regional Planning Commission                              |
| <input type="checkbox"/> West Central Community Facility Governing Board         |   |
| <input type="checkbox"/> Berkshire Landing New Community Authority               | <input type="checkbox"/> Concord-Scioto Community Authority                                 |
| <input type="checkbox"/> The Northstar New Community Authority                   | <input type="checkbox"/> Sunbury Meadow Community Authority                                 |

ADDRESS: \_\_\_\_\_  
Number Street City State Zip

Home/Cell Phone: ( ) \_\_\_\_\_ Business Phone: ( ) \_\_\_\_\_

Personal email: \_\_\_\_\_

**EDUCATION:**

Institution	Degree

**CURRENT EMPLOYER:**

Employer's Name and Address: \_\_\_\_\_

Title or Position Held: \_\_\_\_\_

Date of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_

**OTHER APPOINTED POSITION(S) HELD** (Use separate sheet of paper if necessary.)

Position	Dates Served	Term

  

Position	Dates Served	Term

(please complete other side)

Provide an explanation as to why this Appointment Position is of interest to you and what you can bring to the Board.

---

---

---

---

List qualifications, special skills and/or work experiences that you feel are relevant to the Appointed Position.

---

---

---

---

List your professional and/or civic licenses, certifications or affiliations and any leadership role(s).

---

---

---

---

If you were appointed to this position, what goals or objectives would you attain and/or implement?

---

---

---

---

Have you ever been convicted of a felony or misdemeanor? If yes, please explain:

---

---

Please list three (3) references.

Name	Address	Telephone #	Relationship Affiliation

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

DO NOT WRITE BELOW THIS LINE  
FOR INTERNAL USE ONLY

---

**Application Reviewed By:** \_\_\_\_\_  
Initials/Date Initials/Date Initials/Date

**Appointment Approved By:** \_\_\_\_\_  
Initials/Date Initials/Date Initials/Date

**Resolution Number:** \_\_\_\_\_

**New Term to Begin:** Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

**Replacement Appointment:** Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

**Replacing:** \_\_\_\_\_

**Reappointment:** Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

**Compensation:** ( ) Yes ( ) No Amount \$ \_\_\_\_\_

**Notice of Confirmation Sent** ( ) Yes Date \_\_\_\_\_

**Notification of Chairperson and Members** ( ) Yes Date \_\_\_\_\_

**Additional Comments:**

---

---

---