

CITY OF OSKALOOSA  
BOARD & COMMISSION APPLICATION

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE NO. (Day) \_\_\_\_\_ (Evening) \_\_\_\_\_

BOARD OR COMMISSION APPLYING FOR: \_\_\_\_\_

WHY INTERESTED: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

EXPERIENCE BENEFICIAL TO BOARD OR COMMISSION: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

OTHER CIVIC EXPERIENCE: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PLEASE RETURN TO THE CITY CLERK'S OFFICE