

**Commissioner Questionnaire**  
**City of Highland Park**  
Highland Park, IL 60035

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

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

Home Telephone: \_\_\_\_\_ Home E-Mail \_\_\_\_\_ Highland Park Resident \_\_\_\_\_ years

Business Name and Address: \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_ Business Phone: \_\_\_\_\_ Business E-Mail \_\_\_\_\_

Indicate the Boards or Commissions you are interested in:

<input type="checkbox"/> Board of Police and Fire Commissioners	<input type="checkbox"/> Business and Economic Development Commission
<input type="checkbox"/> Cultural Arts Commission	<input type="checkbox"/> Firefighters Pension Board
<input type="checkbox"/> Historic Preservation Commission	<input type="checkbox"/> Housing Commission
<input type="checkbox"/> Human Relations Commission	<input type="checkbox"/> Joint Plan Commission
<input type="checkbox"/> Library Board of Trustees	<input type="checkbox"/> Natural Resources Commission
<input type="checkbox"/> Plan and Design Commission	<input type="checkbox"/> Police Pension Board
<input type="checkbox"/> Ravinia Festival Community Relations Commission	<input type="checkbox"/> Transportation Commission
<input type="checkbox"/> Zoning Board of Appeals	

Educational Background: \_\_\_\_\_

Service with other City organizations: \_\_\_\_\_

\_\_\_\_\_

Special Skills: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have you ever been convicted of a Felony? Yes \_\_\_ No \_\_\_ If yes, please attach an explanation.

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

Signature