



CITY OF TROY | CITY CLERK'S OFFICE | 500 WEST BIG BEAVER | TROY, MI 48084
 248-524-3316 | FAX: 248-524-1770 | E-MAIL: CLERK@TROYMI.GOV

Application for Boards and Committees

Thank you for your interest in serving on a Board or Committee.
 This form provides the Mayor and City Council basic applicant information to be considered for appointment.
 (PLEASE PRINT OR TYPE)

Mr / Mrs / Ms	First Name	Middle or Nick Name	Last Name	Date
Address		City	State	Zip Code
			MI	Home #
Email Address				Cell #
Employer:				Title
Address:		City	State	Zip Code
			MI	Work #

How long have you lived continuously in the City of Troy? _____

Are you a registered voter in the City of Troy? Yes No (Verified by Clerk's Office)

Are you affiliated with any political party? Yes No

Are you a graduate of Troy's Citizen Academy? Yes No

Are you related to anyone employed by, or an elected official of the City of Troy? Yes No

If yes, please provide the person's name and your relationship: _____

Have you ever been convicted for anything other than a minor traffic violation? Yes No

Do you have access to electronic resources (home computer, email, Internet access)? Yes No

(Many boards and committees use electronic methods to distribute meeting information.)

Select **ONLY three (3)** boards or committees you wish to apply for in the order of your preference:
 1=First Choice, 2=Second Choice, 3=Third Choice:

- | | |
|---|--|
| _____ Animal Control Appeals Board | _____ Board of Review |
| _____ Brownfield Redevelopment Authority | _____ Building Code Board of Appeals |
| _____ Charter Revision Committee | _____ Civil Service Commission (Act 78)** |
| _____ Downtown Development Authority (DDA) | _____ Economic Development Corporation |
| _____ Election Commission** | _____ Global Troy Advisory Committee |
| _____ Historic District Commission | _____ Liquor Advisory Committee** |
| _____ Local Development Finance Authority (LDFA) | _____ Municipal Building Authority |
| _____ Parks & Recreation Board | _____ Personnel Board |
| _____ Planning Commission** | _____ Traffic Committee |
| _____ Retirement System Board of Trustees & Retiree | _____ Volunteer Firefighter Incentive Plan Board |
| _____ Health Care Benefits Plan & Trust | _____ Zoning Board of Appeals (ZBA)** |

****Contact the City Clerk's Office for additional application requirements**

NOTE: Your application will be kept on file for two (2) years.

Professional Qualifications and/or Work Experience:

Community Activities and/or Other Experience:

Educational Background:

References (Please list name and address):

Indicate reasons for desiring to serve:

Applicant's Signature

Date

FOR OFFICE USE ONLY

Received by: _____

Date: _____

- Confirmed voter status
- Confirmed current *Full Disclosure Statement* on file
- Confirmed compliance with applicable federal, state and local statutes
- Confirmed receipt of Affidavit for Election Commission

Confirmed by: _____