



Application for Board, Commission, or Committee Appointment/Reappointment

If appointed, terms begin April 1.

Name: _____

Home Address: _____

Phone: _____ Email: _____

On which board(s) are you interested in serving?

Board of Zoning Appeals

Zoning Commission

Communications Advisory Committee

Police Advisory Committee

Parks Advisory Committee

Fire/Rescue/EMS Advisory Committee

Other (please explain): _____

Please summarize any prior Township involvement (if needed, attach additional pages):

If seeking reappointment, when were you originally appointed on this board? _____

Applicants are expected to attach additional information, including:

- Resume or Short Bio: Listing relevant certifications, affiliations, employment, and educational experience.

By signing this application, I agree to comply with applicable state ethics laws and to ensure all functions of the board are held in accordance with the Ohio Sunshine Law. I shall make every effort to attend all meetings of the board faithfully through the tenure of my term or otherwise notify the chair of the board of my expected absence prior to the meeting. I agree to serve in the best interest of the residents of Genoa Township.

Applicant's Signature

Date