

**CITY OF WATERLOO, IOWA  
BOARDS & COMMISSIONS APPLICATION**

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

I, \_\_\_\_\_, request to be appointed to (state preference):  
(Name)

1. \_\_\_\_\_ 2. \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Email Address \_\_\_\_\_

Home Address \_\_\_\_\_ Zip Code \_\_\_\_\_

Employer \_\_\_\_\_ Title \_\_\_\_\_

Employer Address \_\_\_\_\_ Zip Code \_\_\_\_\_

How long have you resided in Waterloo? \_\_\_ yrs Email address: \_\_\_\_\_

List current membership in organizations and offices held: \_\_\_\_\_

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

I am available for meetings:  A.M.  P.M.  Noon  Evenings

I am available to serve on a Board/Commission the entire year:  Yes  No If no, list months not able to serve: \_\_\_\_\_

Briefly explain your qualifications for appointment to a designated Board/Commission: \_\_\_\_\_

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

Additional information and comments that may not be evident from information already on this form: \_\_\_\_\_

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

References (include phone numbers): \_\_\_\_\_

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

I understand this application does not bind me to accept an appointment should it be offered, nor does it guarantee an appointment to a Board/Commission. If selected, I will be available to attend appropriate training sessions. This application will remain valid and on file for one calendar year from above date.

Signature \_\_\_\_\_

**RETURN TO MAYOR'S OFFICE, 715 MULBERRY ST., WATERLOO, IA 50703  
FAX 291-4286; EMAIL: [mayor@waterloo-ia.org](mailto:mayor@waterloo-ia.org); PHONE 291-4301**