



Application for City Board or Commission Appointment

Date _____ Name _____

Address _____

Phone _____ E-mail _____

Board/Commission appointment interested in _____

Party Affiliation (OPTIONAL, though some boards and commissions require a balance by party affiliation)

Democrat Republican Other: _____

1. Explain related background, interest, or experience.

2. Describe any interest or experience you have in collaborative decision-making.

3. Describe why you are interested in participating in this board or commission.

Thank you for your interest in this board or commission.

Return to: Mayor's Office
202 S. 5th St., Ste. 1
Goshen, IN 46528-3714

Fax: 533.9740

Email: mayor@goshencity.com

If you are filling out this form electronically, please download it before filling it out. If you plan to email it, please make sure to save a copy of your filled out application on your computer or on an external drive before emailing it.