

Or email the application to:

wblack@haysvilleks.gov

APPLICATION FOR APPOINTMENT TO CITY OF HAYSVILLE BOARDS OR COMMISSIONS



Name of Applicant	Address	
How many years have you re	sided in Haysville or in Haysville's	Area of Influence?
	rved for Haysville residents. The Planning positions available to persons who reside v	Commission, Bicycle Pedestrian Advisory Committee within Haysville's Area of Influence.
Home Telephone	Work Telephone	Email
Board or Commission Applyi	ng For	
Please state why you are into capabilities you would bring	_	ommission and indicate what expertise and/or
	nty, school, hospital, etc.) or electe chool, hospital, etc.) or elected offi	ed offices are you currently serving on? What ces have you ever served on?
Please list any present and p	ast community volunteer activities	:
•	ge, would the appointment on you our employment or business endea	r desired board/commission create any avors? If yes, explain.
Submission of application does not	guarantee board/commission appointme	ent.
Signature of Applicant		Date
		Date
Return completed application to:	City of Haysville, P.O. Box 404, Haysville,	