



Application for Vacant Town Council Seat
Two year term will expire December 2019

Application Deadline: 5:00 p.m. Friday, March 30, 2018

APPLICANT INFORMATION:

Name: _____

Address: _____
Street City State Zip Code

Telephone Number: _____

Email Address: _____

QUALIFICATIONS:

I certify that I meet the following Qualifications:

I am a citizen of the United States. Yes No

I am a registered voter in the Town of Apple Valley. Yes No

I have been a resident of the Town of Apple Valley or a resident of a recently annexed area of the Town of Apple Valley for the previous twelve (12) months. Yes No

I have not been convicted of a felony. Yes No

CERTIFICATION OF APPLICANT:

PLEASE READ THE FOLLOWING PARAGRAPH CAREFULLY BEFORE SIGNING.

I certify that all statements made in this application are true and complete and understand that any misrepresentation of material fact in this document or during an interview may subject me to disqualification.

I understand that information provided on this application is a public record and authorize the Town of Apple Valley to release the information contained herein.

Applicant's Signature

Date

All applicants are requested to submit, with the application, a resume and a brief one (1) page written statement explaining why you are interested in serving on the council and any prior involvement in Town or community organizations or activities.