



**APPLICATION FOR APPOINTMENT TO
BOARD, COMMISSION OR COMMITTEE OF
THE TOWN OF ST. JOHN, INDIANA**

NAME: _____

ADDRESS: _____

TELEPHONE: _____ (Check if Cell Phone)
 Primary
 _____ (Check if Cell Phone)
 Secondary

Do you use text messaging: _____

Email Address: _____

BOARD, COMMISSION OR COMMITTEE:

First (1st) Choice: _____

Second (2nd) Choice _____

RELEVANT EXPERIENCE (PRIVATE SECTOR / PUBLIC SECTOR / VOLUNTEER):

REASON(S) FOR REQUESTING APPOINTMENT:

Political party ballot taken in last Primary Election – “D”, “R”, or Other: _____
(Information required for certain appointments)

Years lived in St. John: _____

*I hereby certify that I have received a copy of the **Town of St. John Ethics Ordinance No. 1313 & 1341** attached and agree to abide by any and all of its provisions if appointed.*

I further certify by my signature below that all the information provided in this application is true and authorize the Town of St. John to verify all of the aforementioned information provided.

SIGNATURE: _____

DATE SUBMITTED: _____

**Save completed PDF with your
last name + boardapp and
Email to:
boardapps@stjohnin.com**

[OFFICE USE ONLY]