



CITY OF WASHINGTON
COUNCIL MEMBER APPLICATION FORM

The Washington City Council is made up of 6 citizens of Washington who regularly meet twice a month on the first and third Tuesdays of the month at 6:00 p.m. Other special meetings are called as needed and special budget meetings are held in January and February. Council members are expected to read their meeting packets in advance of meetings, be available to discuss concerns with citizens and serve on additional committees as assigned.

Please return to: City of Washington, ATTN: City Clerk, PO Box 516, Washington, IA 52353

NAME _____ HOME ADDRESS _____

OCCUPATION _____ EMPLOYER _____

PHONE NUMBER: HOME _____ BUSINESS _____

E-MAIL ADDRESS _____

EXPERIENCE AND/OR ACTIVITIES WHICH YOU FEEL QUALIFY YOU FOR THIS POSITION

WHAT IS YOUR PRESENT KNOWLEDGE OF THE CITY COUNCIL

WHAT CONTRIBUTIONS DO YOU FEEL YOU CAN MAKE TO THE CITY COUNCIL? (OR STATE REASON FOR APPLYING)

WHAT EDUCATION, WORK EXPERIENCE, VOLUNTEER EXPERIENCE, BOARD EXPERIENCE DO YOU HAVE THAT WOULD HELP YOU BE QUALIFIED FOR THE CITY COUNCIL?

Signature

Date