



Application for Committee Appointment
City of Medina Boards and Commissions
132 N. Elmwood Avenue
P.O. Box 703
Medina, Ohio 44256

Board/Commission Applying For: _____

Name: _____
(First) (Middle Initial) (Last)

Address: _____
(Street) (City) (Zip Code)

Telephone: _____ - _____ - _____
(Work) (Home) (Cell)

E-Mail: _____

Are you related to any current employee of the City? YES _____ NO _____
If yes, give the name and position: _____

Are you an elected or appointed public official? YES _____ NO _____
If yes, please specify: _____

Have you ever been convicted of a violation of any law, other than minor traffic? _____

Education:
High School: _____ Date of Graduation: _____
Post High School Education: _____

Military History:
Branch of Service: _____ Discharge Date: _____
Type of Discharge: _____ Highest Rank: _____

Employment History:
Present or last employer: _____
Dates of employment: from: ____ / ____ / ____ to: ____ / ____ / ____
Your title and duties: _____

Previous Employment:
_____/_____/_____/_____/_____
Company Position From To

