



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

Board/Commission Applying For: _____

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

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

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

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 Employer: _____
Dates of employment: From: _____ To: _____
Your title and duties: _____



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References: (list three people not related to you who have definite knowledge of your qualifications for this position)

Name	Address	Telephone No.
_____	_____	_____
_____	_____	_____

Statement: Please provide a brief statement why you feel you are qualified for this appointment. If you are seeking re-appointment, please indicate what your contributions have been to the Board or Commission during the time of your service.

I certify that the statements made by me in this application are true, complete, and correct to the best of my knowledge and belief and are made in good faith. I understand that any false statements will void this application and any actions based on it. My signature below authorizes the City of Medina, or its agents, to verify the accuracy of this information including employment and education.

Signature of Applicant: _____ **Date:** _____

Please return the completed application by: _____/_____/_____ to the Mayor's Office located at 132 N. Elmwood Ave., Medina, Ohio 44256.