

APPLICATION OF INTEREST

for possible appointment to:

LONG LAKE TOWNSHIP COMMISSIONS, BOARDS, OR COMMITTEES (please print or type)

NAME: _____

ADDRESS: _____

PHONE: day _____ evening _____

EMPLOYMENT: _____

Type of work: _____
(please indicate previous type of work if retired.)

AREA(S) OF COMMUNITY INTEREST:

_____ Planning Commission
_____ Zoning Board of Appeals
_____ Recreation
_____ Board of Review (Assessment Appeal)
_____ Other _____

RELATED EXPERIENCE: _____

COMMENTS: _____

SIGNATURE: _____ **DATE:** _____

PLEASE RETURN TO: LONG LAKE TOWNSHIP
ATTENTION: KAREN ROSA
8870 NORTH LONG LAKE ROAD
TRAVERSE CITY, MI. 49684

NOTE: This application is provided to obtain basic and comparable information on possible candidates. Please be advised that the information you provide on this application may be disclosed through a Freedom of Information Act (FOIA) request.

