

APPLICATION FORM FOR Pottawattamie County Veteran Affairs COMMISSION

Please Return To:

Pottawattamie County Veteran Affairs

623 6th Ave.

Council Bluffs, Iowa 51501

Phone: (712) 328-5797 Fax: (712) 328-5726

Application For: Veteran Affairs Commission

Date _____ **E-mail Address** _____

Name _____

Address _____

Phone Number _____ **Fax Number** _____

Business Phone _____ **Cell Phone** _____

This form assists the Board of Supervisors in evaluating the qualifications of applicants for appointment to a board or commission. State law requires political subdivisions to make a good faith effort to balance most appointive boards, commissions, committees, and councils according to gender by January 1, 2012, and each year thereafter.

What gender do you identify as Female Male

Dates of Military Service In: _____ **Out:** _____ **Character of service** _____

A copy of all DD214's must be provided for verification

Place of employment and position (and/or activities such as hobbies, volunteer work, service organization memberships etc. that you feel may qualify you for this position):

The following questions will assist the Board of Supervisors in its selection.

■ **How much time will you be willing to devote in this position?**

■ **Interest in Appointment: Describe in detail why you are interested in serving on the Veteran Affairs Commission. Include information about your background that supports your interest.**

■ Contributions you feel you can make to the Veteran Affairs Commission:

■ Direction/role you perceive of this Veteran Affairs Commission:

■ In lieu of/in addition to the above, do you have any comments to add that may assist the Board of Supervisors in its selection?

■ Please provide two references who may be contacted on your qualifications for this position.

Name	Address	Phone number	Email address	Relationship
------	---------	--------------	---------------	--------------

Have you reviewed the responsibilities as a Veteran Affairs Commissioner? _____yes _____no

I certify that there is nothing that would prohibit me from serving on this commission.

Signature _____ Date _____

***YOUR APPLICATION WILL BE RETAINED IN OUR FILES FOR ONE YEAR
THIS APPLICATION IS A PUBLIC DOCUMENT AND AS SUCH CAN BE REPRODUCED AND
DISTRIBUTED FOR THE PUBLIC.***