



**CITY OF MARSHALL
BOARD, COMMISSION, AUTHORITY OR BUREAU
APPLICANT INFORMATION FORM**

Please indicate the Board, Commission, Authority or Bureau to which you are interested in being appointed: *(If more than one, please number in order of choice; you can only serve on one board, commission, authority or bureau)*

- Adult Community Center Commission (meets the second Wednesday of every month at 12:00 p.m.)*
- Airport Commission (meets first Tuesday of every month at 4:30 p.m.)*
- Community Services Advisory Board (meets the first Wednesday of every month at 4:30 p.m.)*
- Convention & Visitors Bureau (meets the third Thursday of every month at 2:00 p.m.)*
- Economic Development Authority (meets the third Wednesday of every month at 12:00 p.m.)*
- Library Board (meets the second Monday of every month at 4:00 p.m.)*
- M.E.R.I.T. Center Board (meets the third Thursday of every month at 6:00 p.m.)*
- Planning Commission (meets the second Wednesday of every month at 5:30 p.m.)*
- Police Advisory Board (meets on an as needed basis)*
- Public Housing Commission (meets the second Monday of every month at 3:30 p.m.)*
- Marshall Municipal Utilities Commission (meets the third Wednesday of every month at 4:30 p.m.)*

Applicant Information

Personal Information

Minnesota State Statute §13.601 states that once an individual is appointed to a public body the following additional items of data are public:

- (1) Residential address; and*
- (2) Either a telephone number or electronic mail address where the appointee can be reached, or both at the request of the appointee.*

Name: _____ (Home #): _____

Address: _____ (Work #): _____

(you must live within the City limits of Marshall with the exception of the MERIT Center)

(Cell #): _____

Email Address: _____ Have lived in Marshall _____ years

List your educational background:

WORK EXPERIENCE: (List most recent position first)

Position Years

Employer

Location

(Title)

Employed

OVER

List any community organizations or activities on which you have recently or are now an active participant.

Briefly tell us why you would like to serve and/or continue to serve on this Board, Commission, Authority or Bureau.

Signature

Date of Application

NOTE: The attached Consent for Release Information Forms must be completed before processing this application.

Please return the application and consent information to:

**City Administration Office
Municipal Building
344 West Main Street
Marshall, MN 56258
cathy.lee@ci.marshall.mn.us
507-537-6830**

or email to:
or fax to: