

# APPLICATION FOR APPOINTMENT

Apply online or return this completed form to:

Mayor Dan Devine  
7525 W. Greenfield Ave.  
West Allis WI 53214



Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Phone/Cell: \_\_\_\_\_

Place of employment: \_\_\_\_\_

Job title: \_\_\_\_\_

Are you a West Allis resident?  Yes  No If yes, how long have you been a resident? \_\_\_\_\_

Do you own or rent your home?  Own  Rent

If you are not a City of West Allis resident, do you own property within the corporate limits of the City?  Yes  No

If yes, please list the type of property and its address: \_\_\_\_\_

Do you own a business within the corporate limits of the City of West Allis?  Yes  No

If yes, please list its name and address: \_\_\_\_\_

Are you a registered voter?  Yes  No

Have you previously served as a member of any City of West Allis committee, commission or board?  Yes  No

If yes, what committee, commission or board? \_\_\_\_\_

Education background: \_\_\_\_\_

Previous volunteer experience: \_\_\_\_\_

Special skills or prior experience that are relevant to your appointment on your preferred committee(s): \_\_\_\_\_

Why do you wish to serve on a committee? \_\_\_\_\_

## Committee Preference

Please rate your 1st, 2nd, 3rd and so on preferences for committee placement. You do not have to rank all committees, only those which you are interested in.

\_\_\_ Administrative Review Board

\_\_\_ Beautification Committee

\_\_\_ Board of Appeals

\_\_\_ Board of Health

\_\_\_ Board of Review

\_\_\_ Capital Improvement Committee

\_\_\_ Events Committee

\_\_\_ Civil Service Commission

\_\_\_ Commission on Aging

\_\_\_ Community Development Authority

\_\_\_ Community Development Block Grant Committee

\_\_\_ Ethics Board

\_\_\_ Fair Housing Board

\_\_\_ Historical Commission

\_\_\_ Library Board

\_\_\_ Plan Commission

\_\_\_ Police and Fire Commission

\_\_\_ Tourism Commission

\_\_\_ Youth Commission

\_\_\_ Farmer's Market Committee

**SUBMIT**

## OPTIONAL:

Attach your resume and/or an additional cover letter if you feel this information would assist the Mayor in considering your appointment.

