DAVISON TOWNSHIP

COMMITTEE MEMBER APPLICATION

Name: _____

Address: _____

How long have you lived at this address: _____

Telephone: Home_____ Cell _____ Business _____

Email Address: _____

Occupation: _____

Committee Applying For: _____

Will you sit on another committee if we have an opening? Yes _____ No _____

If so, what committees: _____

Why do you want to serve and what do you feel you have to offer to the committee/authority/board for which you have indicated an interest:

_____

_____

_____

_____

Please give a brief summary of your educational and work background as well as any previous civic or service club involvements. (Optional)

_____

_____

Please complete and return this form to:

Davison Supervisor, Davison Township, 1280 N. Irish Road, Davison, MI 48423

This information will be provided to the Township Board for use in making appointments to the various committees, boards, authorities. Completion of this form does not guarantee an appointment.

Signature: _____ Date: _____

Thank you for your interest in serving Davison Township.

8/31/2021