



CITY OF  
EAST GRAND RAPIDS

750 LAKESIDE DRIVE SE · EAST GRAND RAPIDS, MICHIGAN 49506  
(616) 949-2110

**APPLICATION FOR COMMISSION APPOINTMENT**

Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

E-mail address: \_\_\_\_\_

Daytime Phone \_\_\_\_\_

Evening Phone \_\_\_\_\_

Business/Firm \_\_\_\_\_

Position/Occupation \_\_\_\_\_

Work Experience \_\_\_\_\_  
\_\_\_\_\_

Volunteer Experience/Involvement \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Educational Background \_\_\_\_\_  
\_\_\_\_\_

Do you know of any conflict of interest or reason you should not receive this appointment?  
\_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_

Commission Applied For: (check)

\_\_\_\_\_ Planning Commission

\_\_\_\_\_ Parks & Recreation Commission

\_\_\_\_\_ Library Commission

\_\_\_\_\_ Board of Review

\_\_\_\_\_ Construction Board of Appeals

\_\_\_\_\_ EGR Community Foundation Board

\_\_\_\_\_ Any Available

You may attach any other information deemed relevant to your appointment.  
Please return to City Clerk's Office at above address.