



CITY OF EDGEWOOD CITIZEN COMMISSION/BOARD APPLICATION

DATE: _____

BOARD/COMMISSION APPLYING FOR: _____

Please complete the entire application form. Applicants are strongly encouraged to attach a cover letter and/or a resume totaling not more than three pages for consideration.

NAME: _____
LAST FIRST INITIAL

ADDRESS: _____ PHONE: _____
CITY STATE ZIP CODE

E-MAIL ADDRESS: _____ ALT. PHONE: _____

**Have you previously served on a City of Edgewood Board/Committee/Commission?
(If yes, please explain.)**

Yes No

Are you able to attend evening meetings? Yes No

Daytime meetings? Yes No

Other comments/additional information for consideration: _____

