



Application for Board / Commission Membership

Name: _____

Address: _____

Date of Birth: _____ Occupation: _____

Cell Phone: _____

Email Address: _____

Educational Background:

Employment Background (attach resume if available):

Board(s) or Commission(s) of interest:

Explain why your background/qualifications make you a strong candidate to serve on the above Board(s) / Commission(s):

Please return this completed form and resume to:

Mayor Clint Hull
2 E. Main Street
St. Charles, IL 60174
Or email to: cityadmin@stcharlesil.gov