

BOARDS AND COMMISSIONS APPLICATION
CITY OF HARLAN, IOWA

Name: _____

Harlan Resident Since: _____

Address: _____

Telephone:
Business: _____

Home: _____

Email: _____

Education or experience applicable to choices marked below: _____

Civic Activities: _____

Indicate no more than 3 Board or Commissions interested in serving on:

- | | |
|-----------------------------------------------------|---------------------------------------|
| _____ Airport Commission (6) | _____ Zoning Board of Adjustment (5) |
| _____ Planning & Zoning (4) | _____ Parks & Recreation Board (4) |
| _____ Library Board (4) | _____ Tree Advisory/Environmental (4) |
| _____ Veterans Memorial Auditorium (3) | |
| _____ Harlan Municipal Utilities Bd of Trustees (6) | () Indicates Years Per Term |

This application will remain in an active file for a period of 2 years.

Signature: _____ Date: _____

Please return to: **Harlan City Hall, 711 Durant Street, PO BOX 650, Harlan, IA 51537**

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FOR OFFICE USE ONLY !

Date Received: _____

Comments: _____