
9. Do you have a conflict of interest or potential conflict of interest such as a financial or business interest in any contracts, grants, permits, etc. with Dickinson County? If so, list the interest (except where required for the appointment).

10. List any family members who are or have been employed by Dickinson County or are or have been elected to County offices.

11. Is this an application for reappointment? Yes _____ No _____

If yes, how many years have you served on this board? _____

Please indicate your attendance record for the term(s) served _____ / _____
No. of meetings attended No. of meetings held

Comments/clarification (only if necessary)

12. Briefly indicate your qualifications for appointment to this specific board and why you believe your appointment will benefit Dickinson County.

13. I hereby apply for appointment to _____ and do swear or affirm that (1) if appointed, I will comply with all statutory and other requirements and obligations of my appointment; (2) if I cease to comply with such requirements, I automatically forfeit said appointed position; (3) I hold no position or appointment which is a conflict of interest with the appointed position applied for; and (4) to the best of my knowledge and belief, I possess the requisite qualifications for the office I am seeking.

Signature

Name (Print or Type)

Note: Applicants may attach additional information pertaining to this application for appointment.

- Resume
- Letter of Reference
- Letter of Intent