Application for Appointed Boards or Commissions

Planı	ning & Zoning Commission	Board of Z	Zoning Adjustment
Park	Board		
Name:		<u> </u>	
Home Addre	ss (required):		
Mailing Add	ress (if different than above):		
Are you a res	ident of the City of Hallsville?Ye	esNo	Applicants must be residents of Hallsville
Phone (day):	Phone (evening):	E	Email:
Current Emp	loyer:	Tit	tle:
How did you	learn about Hallsville boards and comr	nissions?	
[] Facebook	/Website [] Organization [] Mayor	/Alderman []	Other
Why are you	interested in serving on a Hallsville boa	ard?	
	er served on a Hallsville board?		No
If yes	s, which ones?		Dates Served:
•	ng to any community organizations or p		•
Return to:	Hallsville City Hall 202 Hwy 124-E Hallsville, Missouri 65255		

declare that i that informat	all statements in this application are tr f I am appointed, I will serve fairly, im ion contained in this application is put fissouri Sunshine Laws.	partially, and to	the best of my ability. I acknowledge
l read and un	derstand the above statement:		
Applicant Signature:			Date:

Appointments to boards and commissions are approved by the Board of Aldermen and terms vary depending on the board/commission. Applications are accepted throughout the year by the City Clerk. Appointments are made by the Mayor with the consent of the Board of Aldermen.