

INTEREST NOTIFICATION FORM
FOR ANTRIM COUNTY APPOINTED BOARDS, COMMISSIONS AND COMMITTEES
As required by its Board of Commissioner Policy
www.antrimcounty.org

Name	Applicant for
------	---------------

Mailing Address

E-mail	Home Phone #
	Cell Phone #

Are you a resident of Antrim County? Yes No

Business/Firm/Occupation	Position
--------------------------	----------

Work Experience

Volunteer Experience/Involvement

Educational Background

Briefly state your qualifications for this appointment

Are you able to attend year-round regularly scheduled meetings? Yes No

Do you know of any conflict of interest or any reason you should not receive this appointment? If "yes" please explain: Yes No

Have you ever been convicted of, or pled guilty or no contest to, an offense against the law, or are there any felony charges pending against you? Yes No If "yes" please explain:

Signature _____ Date _____

Mail to: **Administration Office** or email to: countyadmin@antrimcounty.org or fax to: **231-533-8111**
P.O. Box 187
Bellaire, MI 49615