

**Miami County's  
Community Service Application**

*Please complete the following application to indicate your interest in a citizen-appointed position on a Miami County Board or Commission. Your application will be kept on file for 12 months. You will need to reapply after that time if you still wish to be considered for a position. Applications are available at the County Administration Office or on the County Administrator's web page at: [www.miamicountyks.org](http://www.miamicountyks.org) (Get Involved).*

Please print

Name: \_\_\_\_\_  
                    First  Middle  Last

Mailing Address: \_\_\_\_\_

Street Address: \_\_\_\_\_  
(if different)

Phone #: Day \_\_\_\_\_ Evening: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail address

Are you a registered voter in Miami County?  Yes  No

How long have you lived in Miami County? \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Is there a specific Board / Commission vacancy you are applying for?  Yes  No

If yes, which one? \_\_\_\_\_

Why do you want to serve on the Board / Commission? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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Briefly describe your qualifications for this appointment: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

List your community and/or civic involvement: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Personal references that may be contacted:

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Name \_\_\_\_\_ Phone # \_\_\_\_\_

I understand the role and responsibilities of membership on this board / commission and am willing to serve. If appointed, I will attend required meetings and adhere to pertinent bylaws.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

*Mail directly to County Administrator's Office, Miami County, 201 South Pearl Suite 200, Paola, KS 66071.*

**Thank you for your interest in  
Miami County Government**

Office Use Only:

Date Received \_\_\_\_\_ District \_\_\_\_\_

Appointed to \_\_\_\_\_

Date of Appointment \_\_\_\_\_