



CITY OF KENYON
739 2ND STREET
KENYON, MN 55946
 www.cityofkenyon.com
 PHONE: 507-789-6415 FAX: 507-789-5604

Applying For:
 City Council
 Planning Commission
 Other _____

APPLICATION TO CITY BOARD OR COMMISSION

APPLICANT INFORMATION

Name: _____

Address: _____

City: _____ Email Address: _____

Home Phone: _____ Work Phone: _____

Resident of Kenyon for _____ years.

NOTE: APPLICANT'S NAME, ADDRESS AND HOME PHONE NUMBER WILL BECOME PUBLIC INFORMATION IF APPLICANT IS APPOINTED TO SERVE ON A CITY BOARD OR COMMISSION

EXPERIENCE & ADDITIONAL INFORMATION

Work Experience:

Education:

Civic & Volunteer Activities (past / present):

Please state your reasons for wanting to serve on this Commission. Be as specific as possible, and use additional sheet(s) if necessary.

I UNDERSTAND THIS APPOINTMENT MAY BE DISCUSSED AT A PUBLIC MEETING.

 Signature of Applicant

 Date: