

**CITY OF ROGERS CITY**  
**Application for Board or Commission**

PLEASE PRINT OR TYPE

Board or Commission Name: \_\_\_\_\_

Applicants Name		Email Address	
Address	City	State	Zip Code
Home Phone	Work Phone	Cell Phone	
Occupation	Employer	Length of Residency	

Are you a blood or in-law relative of any City of Rogers City elected official, board, commission or committee member; or management employee?  Yes  No. If yes, please list name and relationship:

\_\_\_\_\_

Please tell us why you would like to serve on the board, commission or committee you are applying for:

\_\_\_\_\_

List any educational qualifications, work experience, community or volunteer experience or other qualifications that would help you serve on the board, commission or committee you are applying for:

\_\_\_\_\_

Signature

Date

Complete Form and Return to:

**CITY CLERK'S OFFICE USE ONLY:**

CITY OF ROGERS CITY  
CLERK'S OFFICE  
193 E MICHIGAN AVENUE  
ROGERS CITY MI 49779  
PHONE: (989)734-2191  
FAX: (989)734-4833

Date Filed \_\_\_\_\_ Attended \_\_\_\_\_ Of Past \_\_\_\_\_ Meetings  
First Filed \_\_\_\_\_ Excused \_\_\_\_\_ Unexcused \_\_\_\_\_  
Date Registered \_\_\_\_\_