

APPLICATION FOR COMMITTEE APPOINTMENT

MEDINA COUNTY  
144 N. Broadway Street  
Medina, Ohio 44256

COMMITTEE/BOARD/COMMISSION APPLYING FOR: \_\_\_\_\_

NAME OF CANDIDATE: \_\_\_\_\_  
First Middle Initial Last

ADDRESS: \_\_\_\_\_  
Street City State Zip Code

TELEPHONE: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
Work Home/Cell EMAIL: \_\_\_\_\_

Are you related to any current employee of the County?  No  Yes  
If yes, give name and position \_\_\_\_\_

Are you an elected or appointed public official?  No  Yes  
If yes, please specify: \_\_\_\_\_

Have you ever been convicted of a violation of any law, other than minor traffic (DUI convictions must be disclosed)?  No  Yes (if yes, please specify) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

EDUCATION:

High School: \_\_\_\_\_ Date of Graduation: \_\_\_\_\_  
Post High School Education: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

MILITARY HISTORY:

Branch of Service: \_\_\_\_\_ Discharge Date: \_\_\_\_\_  
Type of Discharge: \_\_\_\_\_ Highest Rank: \_\_\_\_\_

EMPLOYMENT HISTORY:

Present or last employer: \_\_\_\_\_  
Dates of employment: from \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_  
Your title & duties: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Previous employment:

_____ Company	_____ Position	___/___/___ From	___/___/___ To:
_____ Company	_____ Position	___/___/___ From	___/___/___ To:

**REFERENCES** *(List three people not related to you who have definite knowledge of your qualifications for this position):*

Name

Address

Telephone #

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**STATEMENT:** *Please provide a brief statement why you feel you are qualified for this appointment. If you are seeking reappointment, please indicate what your contributions have been to the Committee/Board/Commission during the time of your service.*

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I certify that the statements made by me in this application are true, complete, and correct to the best of my knowledge and belief and are made in good faith. I understand that any false statements will void this application and any actions based on it. My signature below authorizes the Medina County Board of Commissioners, or its agents, to verify the accuracy of this information including employment and education verification.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

*Please return completed application by \_\_\_\_\_ to the Medina County Commissioners Office, 144 N. Broadway Street, Medina, Ohio 44256*