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SUMMIT TOWNSHIP
REQUEST FOR BOARD OR COMMISSION APPOINTMENT

Mail or Personally Deliver to: SUMMIT TOWNSHIP CLERK'S OFFICE
2121 FERGUSON ROAD, JACKSON MI 49203

The Summit Township Board of Trustees appoints individuals to numerous Boards and Commissions. Persons who wish to be considered for appointments should complete the following information.

NAME: _____
Last First Middle Initial

ADDRESS: _____
Street City Zip Code

TELEPHONE _____
Home (Include Area Code) Business (Include Area Code)

Name of Board(s) or Commission(s) to which Appointment is Requested:

_____

Community Activities/Civic Organizations/Boards/Commissions:

Activity/Organization	Length of Membership	Position(s) Held

Employment:

Current Employer	Position	Dates of Employment

Education:

_____

Please indicate why you are requesting appointment to a Board/Commission.

_____

_____

_____

_____

Additional Information you feel may be helpful in considering your Request for Appointment. _____

_____

_____ _____
SIGNATURE DATE

*Summit Township reserves sole right for appointment selection
**Request is subject to Freedom of Information Act