



CITY OF FAIRMONT – 100 Downtown Plaza – Fairmont, MN 56031
www.fairmont.org

Phone (507) 238-9461

Fax (507) 238-9469

Application for Citizen Advisory Boards and Commissions

NAME: _____

ADDRESS: _____

TELEPHONE: _____
Home Business Cell

E-MAIL ADDRESS: _____

EDUCATION:

Grade School: _____

High School: _____

College: _____

Other: _____

EMPLOYMENT:

Past Employment: _____

Current Occupation: _____

Current Employer: _____

ORGANIZATIONS AND COMMUNITY INVOLVEMENT

Past

Present

I am submitting this information requesting that I be considered for:

I am interested in serving on this board because:

Date: _____

Signed: _____

Please use reverse side for additional information you wish to share.