

OFFICE USE ONLY	
Date Received:	
City Population/Class:	
Vacancy Appointment	Election



Metro Cities Board of Directors - Application Form

Please complete the application form, providing as many details as possible. We encourage you to submit a resume and any other materials for consideration.

Name:		Title:	
Organization:			
Address:		City/Zip:	
Organization County:			
Home Phone:		Work Phone:	
Email:			

Length of service in your present position (in years):
Other municipal or related position(s) you have held and the number of years:
Tell us why you are interested in serving on the Metro Cities Board of Directors.
Describe your previous/current involvement/participation in Metro Cities.
What do you see as important roles and responsibilities as a Metro Cities Board member?
Please provide information on how you would contribute to the Metro Cities Board in terms of your specific attributes, experience, etc.

What do you see as significant opportunities and challenges facing cities in the Metropolitan Region?

What expectations would you have for service on the Board?