



Commission Application Form

Date: _____

General Information:

Name: _____
Last First M.I.

Address: _____

City, State, Zip: _____

Phone Numbers: Home: _____ Work: _____

Fax: _____ Fax: _____

E-mail Address: _____

Commission:

If you wish to be considered for more than one (1) commission, please order in number of preference. If applying for a position on the EDA, please order the term choices in order of preference, 1 being the most preferred.

- | | |
|--|---|
| <input type="checkbox"/> Airport Commission | <input type="checkbox"/> Economic Development Authority (EDA) |
| <input type="checkbox"/> Park Commission | <input type="checkbox"/> Two-Year Term |
| <input type="checkbox"/> Planning Commission | <input type="checkbox"/> Three-Year Term |
| <input type="checkbox"/> Other: | <input type="checkbox"/> Four-Year Term |
| _____ | <input type="checkbox"/> Five-Year Term |
| | <input type="checkbox"/> Six-Year Term |

Special Interests:

As the City Council prioritizes its goals, it may create additional/new committees or task forces from time to time. If you have other specific areas or topics of interest, please indicate those interests and we will retain your application for future openings in those areas as new committees are created.

Personal Information:

Please list your work experience.

List any Civic, Professional, and Community involvement.

Why do you want to be on a commission/committee?

What skills, strengths, or abilities do you believe you will add to the commission/committee?

List any additional comments:

References [Please provide name, address, and phone number]:

1. _____
2. _____
3. _____

**Please return this form along with a letter of interest
and current resume (if available) to:**

City of Winsted
ATT: City Administrator
P.O. Box 126
201 First Street North
Winsted, MN 55395
Phone: (320)-485-2366
Fax: (320)485-2858

