

APPLICATION FOR CONSIDERATION OF APPOINTMENT TO:

ARBOR COMMITTEE



Data Privacy Information

The information provided by you on this application will be used to determine your suitability for appointment to a board or commission with the City of Maple Grove and to provide you with information pertaining to your application for this committee or board. If you are selected, a list containing your name, address and telephone number(s) will be distributed to appropriate staff. Participation as a board/commission member is strictly voluntary, and you are not required by law to furnish any of the information requested on this application. If you do not furnish this information, however, we may have trouble determining your suitability for appointment, contacting you with information regarding your application and, if selected, with your duties on the board or commission.

Under Minnesota State statutes, the following information about you is public: name, city of residence, education and training, employment history, volunteer work, awards and honors, and prior government service or experience. Once an individual is appointed to a public body, the following additional items of data are public: residential address; and either a telephone number or electronic mail address where the appointee can be reached. Any other information collected on this application form is private data and will be accessible only to you, pertinent City of Maple Grove staff, or as provided for by Minnesota statutes.

Date: _____

Name _____

Address _____ Zip Code _____

Resident of Maple Grove (years) _____ Phone (home) _____

Name of Employer _____

Occupation _____ Phone (work) _____

Education (Please indicate highest grade completed or highest degree and major course of study) _____

Civic and Other Activities (Please list past and present civic activities and organizational memberships, particularly those which may be relevant to the appointment you are seeking) _____

Comments (Briefly describe other qualifications, experience, and other information which you would like the City to consider or which you believe are particularly relevant to the appointment you are seeking. Use additional pages as necessary.)

Return to: Frank Kampel
City of Maple Grove
P.O. Box 1180
Maple Grove, MN 55311

Date Received: _____

Date Appointed _____