



City of South Haven

BOARD AND COMMISSION APPLICATION

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip

E-Mail Address \_\_\_\_\_

Resident of City? (Circle One) Yes No If Yes, how long: \_\_\_\_\_

Board or Commission Applying for: \_\_\_\_\_

Qualifications: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I believe I can benefit the City of South Haven by serving on a board and commission because: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Return Application to:  
City of South Haven  
Attn: Clerk's Office  
539 Phoenix Street  
South Haven, MI 49090  
Fax: (269) 637-5319  
Phone: (269) 637-0750

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|---|
| <p>For Office Use Only:</p> <p>Appointed _____</p> <p>Term Expires _____</p> <p>Letter Mailed _____</p> |
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