## APPLICATION FOR BOARDS AND COMMITTEES

Name:		Date:
Address:	City:	State Zip:
Email Address:		
Phone:(Home)	(Work)	(Cell\Other)
Are you a resident of Lincoln Length of residency in Linco		
Board or Committee you are	applying for:	
Occupation:		
Employer:		
Have you previously served of If so, which board and for ho	on a County or City board? Yes [ ] w long?	No [ ]
Past Memberships and Associ	ciations:	
Current Memberships and As	ssociations:	
List any relevant qualification you prefer.	ns and/or related experience. Attach	any additional information or a resume if
What are your primary objec	tives for serving on this board?	

An interview may be required if deemed necessary. Thank you in advance for your interest.

RETURN COMPLETED APPLICATION TO: Lincoln County Clerk & Recorder's Office 512 California Ave., Libby, MT 59923

Email: LCCIerk@libby.org Fax: 293-8577

