



City of Powell Board & Commission Application

Date: _____ (Applications for consideration will be kept 2 years from submission)

Board or Commission Applying for:

(If you are interested in more than one, rank in order of preference, 1 being the most desired.)

Arbor Advisory Board _____

Tax Incentive Review Council _____

Planning and Zoning Commission _____

Name: _____ Address: _____

Home Phone: _____ Daytime Phone: _____ Email: _____

Years of residence in City of Powell: _____ Education: _____

Occupation: _____ Employer: _____

Have you previously served on a City of Powell Board or Commission?

Yes _____ No _____

If yes, which one _____ for how long _____

Are you still serving? Yes _____ No _____

What knowledge or understanding of the Board/Commission do you have?

What specific attitudes, skills, and expertise do you think you have to enhance the work of the Board or Commission?

Why do you wish to serve on the Board/Commission?

Will you be able to attend regularly scheduled and special meetings?

Do you have any past experience on other City Boards, Church or Civic Groups?

What are your goals for the City of Powell?

**Applications may be mailed to the City Clerk at 47 Hall Street, Powell, OH 43065,
emailed to sross@ci.powell.oh.us, or faxed to 614.885.5339.**

For City Use only:

Date Received: _____

Interview Scheduled: _____

Disposal Date: _____