




Johnson County, Kansas

Boards, Commissions, and Committees Application Form

Name: _____

Board/Commission applying for: _____

Click on paperclip icon to view list of boards and commissions 

Home Address (required): _____ City: _____ Zip: _____

Mailing Address (if different than above): _____ City: _____ Zip: _____

Business Address (optional): _____ City: _____ Zip: _____

Specify your preferred mailing address: [] Residential [] Business

Official Contact Number: _____

*The information provided above is for official contact purposes only. All information provided is subject to the Kansas Open Records Act (KORA). Except for your name and home address, your information will not be released to the public unless requested through KORA.

Other Phone Number(s): (optional) _____

Email address: (optional) _____

What are your principal areas of interest in our County government?

What experience or special knowledge can you bring to your area(s) of interest?

List all current and past *Johnson County* Boards, Commissions, or Committees for which you currently serve or are a past member:

Committee Name/Appointments	Dates Served
_____	_____
_____	_____

List any community organizations to which you belong (attach supplemental sheet if necessary):

_____	_____
_____	_____



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Have you attended any meetings of the Board/Commission you're applying to? Yes No

Would you be able to attend? Day meetings Evening meetings Either/Both

Current Employer: _____ Title: _____

Summary of Occupational Experience:

How did you learn about Johnson County appointed boards and commissions?

- Internet Newspaper Community Group/Organization County Commissioner Library Posting
- Other _____

To provide commissioners with a summary of your background and experience, please attach your resume and/or biography to this application form.

I understand this application is public record and I certify that the facts contained in this application are true and correct to the best of my knowledge. I authorize and consent to background checks and to the investigation and verification of all statements contained herein as deemed appropriate. I further authorize all information concerning my qualifications to be investigated and release all parties from all liability for any damages that may result from this investigation. I understand and agree that any misstatement may be cause for my removal from any Board/Commission/Committee. I understand regular attendance to any Council Board/Commission/Committee is important and I further understand that if my attendance is less than the standards established for any such body, that this is cause for removal. Lacking any written standards for attendance by any Board/Commission/Committee it is expected that I will attend at least 75% of all meetings during any one calendar year to maintain my seat on any Board/Commission/Committee to which I may be appointed. This form will remain on file in the Board of County Commissioners Office and requests for updates will be sought prior to any consideration for reappointment (or future appointment) to any Board/Commission/Committee.

Signature: _____ Date: _____

Form is invalid if not signed and dated. If you submit via e-mail, be sure to type your name and date. Your name and e-mail address will be verified by the Board Office.

Please return completed form to:
Board of County Commissioners
Attn: Appointment Secretary
111 S. Cherry Street, Suite 3300
Olathe, Kansas 66061
or e-mail to: bocc-clerk@jocogov.org