



CITY OF MOUNT CLEMENS

City Clerk's Office

One Crocker Boulevard, Mount Clemens, Michigan 48043

Appointment to City Boards and Committees Application

PLEASE PRINT OR TYPE CLEARLY

NAME: _____
Last First Middle

ADDRESS: _____
Number & Street City/Zip Code Telephone No.

EMAIL ADDRESS: _____

Length of Time You have Lived in Mount Clemens: _____

Do you **PRESENTLY** or have you **PREVIOUSLY** served on a Board or Committee for the City of Mount Clemens?
☐ YES ☐ NO

If yes, please list the Boards and/or Committees and the term expiration date(s): _____

The following is a list of our current boards and committees. Please note which board or committee that you would be interested in serving. (Please rate your selections with #1 being the board you would prefer to serve on first then #2 next, etc.)

- | | |
|---|--|
| ____ BEAUTIFICATION COMMITTEE | ____ HISTORIC DISTRICT COMMITTEE |
| ____ BOARD OF REVIEW | ____ HISTORICAL COMMISSION |
| ____ BOARD OF ZONING APPEALS | ____ HOUSING COMMISSION |
| ____ BROWNFIELD REDEVELOPMENT AUTHORITY | ____ LIBRARY BOARD OF TRUSTEES |
| ____ CABLE TV COMMISSION | ____ LOCAL OFFICERS' COMPENSATION COMM |
| ____ CIVIL SERVICE COMMISSION | ____ PARKS & RECREATION |
| ____ CONSTRUCTION CODE BOARD OF APPEALS | ____ PLANNING COMMISSION |
| ____ DOWNTOWN DEVELOPMENT | ____ RETIREMENT SYSTEM BOARD OF TRUSTEES |
| ____ HARBOR COMMISSION | ____ TRAFFIC SAFETY COMMITTEE |

Please list community activities and special qualifications: _____





PRESENT EMPLOYMENT:

Name of Business/Firm/Owner	Your Title	Type of Business
Business Address	City/Zip Code	Telephone Number

LIST YOUR JOB DUTIES AND RESPONSIBILITIES: _____

EDUCATION (Optional): _____

PLEASE LIST TWO (2) PERSONAL REFERENCES (Mount Clemens Residents)

1.	Name	Address	Telephone No
2.	Name	Address	Telephone No

I hereby certify that this form is true and accurate to the best of my knowledge.

Signature	Date
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Please return this application to:
CITY OF MOUNT CLEMENS
CITY CLERK'S OFFICE
ONE CROCKER BLVD
MOUNT CLEMENS MI 48043





CITY OF MOUNT CLEMENS

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One Crocker Boulevard, Mount Clemens, Michigan 48043

CODE OF CONDUCT

When appointed to a Board or Committee, you will be required to sign the following Code of Conduct upon Oath of Office:

When appointed to a Board and/or Committee of the City of Mount Clemens, I will perform the duties of the office to the best of my ability and in accordance with the City's policies and procedures and the Charter of the City of Mount Clemens.

I will do my best to inform myself on matters of concerns to the City of Mount Clemens and my specific activities of the group. I will try to attend all meetings and to give careful consideration to the business of the board, committee or commission.

As a member of the board and/or committee of the City of Mount Clemens, I will disclose to the other members any conflict of interest I may have on matters before it.

I will hold in confidence information obtained in my role as a member of a board or committee and will use such information exclusively for City purposes. I will not take advantage of my office in my contacts with representatives of the public or private sector, with other associations or with the City staff.

Signature

Date

