

CITY OF HELENA APPOINTMENT APPLICATION

Please complete this form and return it to the following address: City Clerk's Office, City of Helena, 316 N. Park Avenue, Room 323, Helena, Montana, 59623

Name:	Date:	
Address:		(h)
Email Address:	<u> </u>	(w)
I am applying for appointment to:		
Please write a brief statement explaining named above.	ng why you would like to serve on the	Board(s)
Experience:		
Organizations/Affiliations:		
Education:		
Work Experience:		
Community Service/Volunteer Experier	nce:	
References:		
Please provide the name, address, and .	phone number of two references:	
1 2		
Occupation:		