



Madison County Board Service Interest Form

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address

City State ZIP Code

Phone: _____ Email _____

Board(s) Applying for: _____

Place number (if known): _____

How long have you lived in Madison County?

Madison County Commission District

Madison County Commission District: _____ Are you currently serving on a Board? YES NO If so, what Board? _____
Have you ever served on a board? YES NO If so, what Board? _____

Educational Training or Degree: _____ Business and/or Civic Experience: _____

Employer and Business Information

Employer: _____ Occupation: _____
Phone: _____

Business Address: _____

Disclaimer and Signature

*I certify that my answers are true and complete to the best of my knowledge.
I understand that this form has been developed for convenience and does not guarantee appointment to a board by the County Commission. And that this form will be placed on file within the County Administrator's office for a period of (3) three years. I understand that I will need to submit a new form at the end of three years for continued consideration. I understand that this form needs to be signed and dated to be considered for appointment to a board.*

Signature: _____ Date: _____