JACKSON COUNTY FIRE DISTRICT 5

APPLICATION FOR APPOINTMENT TO THE BUDGET CIVIL SERVICE COMMISSION

| NAME: | | |
|---|-----|----|
| ADDRESS: | | |
| PHONE: | | |
| E-MAIL: | | |
| Are you age eighteen or older? YES NO | | |
| Briefly describe your employment and professional background: | | |
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| | | |
| | | |
| List any community affiliations, boards or committees you have participated in: | | |
| | | |
| List any public offices you have held or currently hold: | | |
| | | |
| Does a member of your immediate family work/volunteer at Fire District 5? | YES | NO |
| Signature Date | | |