

APPLICATION FOR CASSIA COUNTY COMMITTEES, COMMISSIONS AND BOARDS

The Board of Cassia County Commissioners strives to guarantee that their appointments to Cassia County Committees, Commissions, and Boards will best serve the public interest of the County as well as be representative of a broad cross-section of the community. We ask you to provide us with the information that will best assist us in evaluating your application. While we appreciate all applicants' interest and willingness to volunteer, due to potential conflicts of interest, Cassia County employees are not permitted to serve on any volunteer board that is overseen by the Cassia County Commissioners.

Applying for: _____
(Name of Committee, Commission or Board)

Name: Home Address: _____

Telephone Work: _____

Home: _____

Cell Phone: _____

Email Address: _____

How long have you been a resident of Cassia County? _____

Do you live within an incorporated city in Cassia County? If yes, identify the city. _____

Place of Employment: _____

Work Address: _____

Brief Description of Work that you do: _____

Have you ever applied to be a Cassia Volunteer before? Yes _____ No _____

If yes, in what capacity (Committee, Commission, Board)? _____

Please list any professional associations you may be affiliated with.

Please list your current and previous volunteer work (list all previous volunteer work including brief description of duties, activities and dates of service).

Meetings can be held in morning hours, noon hours, afternoon hours and evening hours. There can be a meeting once a week or more. What limitations do you have for attending meetings?

Do you have any other limitations in serving? If so please list: _____

Why do you want to participate as a member of this Committee, Commission or Board?

What particular talents, skills, training or experience could you bring to this Cassia County Committee, Commission or Board? _____

Have you ever been convicted of a crime, other than a traffic infraction? Yes _____ No _____

If yes, what charge: _____

Date convicted: _____ Where _____

Do you consent to a routine check of your criminal records: Yes _____ No _____

Please list three references of people who know you well, other than relatives, preferably for whom you have worked in either a paid or volunteer capacity. If you are currently working, either paid or as a volunteer, please include the name of your supervisor.

Name	Address, Zip Code	Phone	Relationship
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

I certify the answers I have made to each and all of the foregoing questions are true to the best of my knowledge and belief.

Date: _____

Signature of Applicant _____

RETURN TO:

Cassia County Commissioners
Courthouse
1459 Overland Ave., Rm. 210
Burley, ID 83318
Tel. (208) 878-7302 • Fax (208) 878-3510
Email: commissioners@cassia.gov