

CHARTER TOWNSHIP OF CLINTON APPOINTMENT
POLICY GUIDELINES APPOINTMENTS:

- a) Authority: All applications for appointment to boards, commissions and/or committees that the Board of Trustees shall have authority to make shall be submitted to all Board members, and voted upon by the Board of Trustees at a scheduled Board of Trustee's meeting. By state statute, the Planning Commission and the Downtown Development Authority Members are appointed by the Township Supervisor with the Township Board of Trustees approval.
- b) Applications: Interested individuals in an appointment to any boards, commissions and/or committees shall complete an Application for Appointment. Those wishing to be re-appointed are also required to complete an Application for Appointment.
- c) Application Submission: All applications will be submitted to the Administrative Assistant no later than two weeks prior to the date of voting thereon. (As agenda items, ten days prior to the meeting). The cut-off date will be specified on each posting.

The Administrative Assistant will notify all Board Members 60 days in advance of an appointees term expiration.

APPLICATION FOR APPOINTMENT CHARTER TOWNSHIP OF CLINTON BOARDS,
COMMISSIONS OR COMMITTEES

I, _____, hereby make application for
(Name)

Appointment to _____ for a
(Name of Board, Commission or Committee)

Term of _____ from _____ to _____ (Number of
Years) (Appointment date)

(Term Expiration Date)

TO THE CHARTER TOWNSHIP OF CLINTON BOARD OF TRUSTEES: (STATE
OF MICHIGAN - COUNTY OF MACOMB)

1. I reside at _____
(street address, city, zip)

since _____. Telephone #'s: _____

E-mail address: _____

2. I am at least 18 years of age: Yes No

3. Citizen of _____.

4. Employer: _____ Phone: _____

a. Indicate nature of your work: _____

b. Title: _____

5. Educational level and degrees received:

6. I presently hold the following appointments and elected positions:

_____ (Title
and appointment or election date)

7. Previously held appointments and/or elected positions:

_____ (Title and dates of service)

8. Participation in any Township related activities, include any civic, fraternal, charitable, professional organizations, etc. (Add additional pages if necessary)

9. Is this an application for reappointment? Yes No

If YES, how many years have you served on this board? _____

10. Briefly indicate your qualifications for appointment to this specific board/commission and/or committee and why you believe your appointment will benefit Clinton Township.

I hereby apply for appointment to _____
(Name of Board/Commission/Committee)

And acknowledge that (1) if appointed, I will comply with all Statutory and other requirements and obligations of my appointment; (2) if I cease to comply with such requirements, I automatically forfeit said appointed position; (3) I hold no position or appointment which is a conflict of interest with the appointed position applied for; (4) to the best of my knowledge and belief, I possess the requisite qualifications for the office I am seeking ; and (5) I understand that this application and all information contained therein, will become part of the Board of Trustees agenda packet, which will be publicly available.

(Signature)

(Name—Print or Type)