

**APPLICATION FOR APPOINTMENT TO THE
DENMARK TOWNSHIP PLANNING COMMISSION**

NAME _____ DATE _____

ADDRESS _____

PHONE _____ OCCUPATION _____

HOW LONG HAVE YOU LIVED IN TOWNSHIP? _____

OUTSIDE AFFILIATIONS _____

DISCUSS EXPERIENCES THAT YOU HAVE HAD WHICH WOULD AID YOU IN EFFECTIVELY
WORKING ON THIS COMMISSION _____

WHY DO YOU WANT TO SERVE ON THIS COMMISSION? _____

SIGNATURE OF APPLICANT

RETURN TO CLERK/TREASURER BY MAIL OR FAX ALONG WITH A CURRENT RESUME

DENMARK TOWNSHIP, 14008 90th STREET S., HASTINGS, MN 55033
651/436-1704 CLERK/TREASURER PHONE/FAX