



COMMISSION QUESTIONNAIRE

Name

R E S I D E N C E	Present address <input type="checkbox"/> Own <input type="checkbox"/> Rent
	Telephone Email Address
	Length of residence at present address
	Last previous address
	Length of residence at previous address

O C C U P A T I O N	Company Name
	Address
	Telephone May we contact you at work? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Company's Principal Business Activity
	Describe briefly the nature of your employment duties

E D U C A T I O N	High School Graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No
	College Attended
	Address
	Degree received, if any
	Major Field of Study

Approximate time available to devote to the duties of the appropriate positions

On which of the Village's commissions and/or boards would you be most interested in serving?

What do you believe to be the most important task or basic mission of the Commission(s) you have indicated above?

In what civic activities are you presently engaged?

To the best of you knowledge and belief, would there be any conflict of interest (personal, business, investment, etc.) if you were appointed to a Committee or Commission?
<input type="checkbox"/> Yes <input type="checkbox"/> No

Signed
Dated