

Board and Commission Application

Personal Information Form

Personal Information							
Legal Name First:	Middle:		Last:	Last:			
Driver's License No. (Optional)							
Email:					Phone:		
Current Address:							
City:			State:	ZIP Code:			
Date of Birth (Optional):							
Select the Ward in which you reside. You can verify your Ward by looking up your voter registration information at www.michigan.gov/vote . Ward 1 Ward 2 Ward 3 Outside City Not Sure							
If you live in the City of Grand Rapids, how long have you been a resident?							
In the past ten years, have you been convicted of a crime involving:							
Employment and Experience							
Current Employer:	Occupation:						
Employer Address:				Phone:			
City:			State:	ZIP Code:	ZIP Code:		
appointment to a Board or Commission. You may use additional paper or include a resume as needed.							
If you are currently serving or have ever served as an appointee to any government agency Board or Commission, please list below.							
Board:			Agency:	Dates of Service:			
Board:			Agency:	Dates	Dates of Service:		
Board:	Agency:	ncy: Dates of Service:					
Please provide two, non-family refer	ences below.						
Name:	Address:				Phone:		
Name:	Address:				Phone:		
Preferences and Conflict of Interest							
List in order of preference which Board or Commission you would like to serve.							
First Choice:			Fourth Choice:				
Second Choice:			Fifth Choice:				
Third Choice:			Sixth Choice:				
If you are employed by or associated with a business, organization or individual that would benefit from your service on this board, please explain: If you have any relatives or friends who are employees, appointed officers or elected officials of the City of Grand Rapids, please name them:							
If there are any reasons you may hav	e a conflict of interest should	d you be a	appointed to a Board or Commissio	n listed abov	e, please explain:		

Eligibility Review

The Michigan Home Rules Act states "A City does not have the power to do any of the following... (f) To make a contract, or give an official position to, one who is in default to the city" MCL 117.5 (1f). Applications will be reviewed by the Treasurer's Office, Income Tax Department, and the Department of Law to verify there are no outstanding dues owed to the City. Staff will work with applicants to help them meet the compliance requirements in a confidential and courteous manner. If you are unsure of dues that may be owed, a list of items that are reviewed and the office contact information is listed below.

Treasurer's Office

616.456.3020 • www.grcity.us/treasurer

The Treasurer's Office checks for dues owed to the City including: real or personal property tax, special assessment, property violation fees, and parking tickets. If you are unsure about whether you have any of these outstanding dues, contact a representative of the Treasurer's Office. qrtreasurer@grcity.us

Income Tax Department

616.456.3415 • www.grcity.us/incometax

Income tax return filings of applicants (including their business entities) and amounts that might be owed are checked against the years a person has lived, worked or conducted business in the City. If you are unsure about whether you've filed with the City, review your records or contact a representative of the Income Tax Department. grincometax@grcity.us

By signing below, I understand my application will be reviewed against City records for dues owed and should a default be discovered, I will be ineligible for a position until issues are brought into compliance.

Applicant Signature: Date:

Signature

By signing below:

- I affirm all information provided above is true and accurate to the best of my knowledge;
- I understand providing information I know is untrue may disqualify me from service;
- I understand this application will be kept on file for a period of up to one year; and
- I understand that if I wish to be considered for a position beyond this period, I should contact the City Clerk's Office.

Applicant Signature: Date:

Optional Information

The following Affirmative Action and Equal Opportunity information is requested to help determine whether application information for City Boards and Commissions is reaching all segments of the community. Provision of the following information is optional, and you will not be penalized if y o u do not complete this section. Please check as appropriate.

Gender:	Woman Man Non-binary/non- Conforming Prefer to Self-Describe Prefer not to respond	Race	Biracial or Multiracial	LGBTQIA+ Identity*: □ Yes, I identify as a member of the LGBTQIA+ Community □ No, I do not identify as a member of the LGBTQIA+ Community □ Prefer not to Respond
Disability S	tatus: Yes, I have a disability No, I do not have a disability Prefer Not to Respond	Ethnicity	Hispanic or Latino/a/x Not Hispanic or Latino/a/x	*LGBTQIA+ stands for Lesbian, Gay, Bisexual Transgender, Queer/Questioning, Intersex, Asexual, and the "+" is an all-inclusive way to include additional terms used to describe one's gender, romantic, and sexual identities for thos who do not identify with heterosexuality and/or the gender binary.

Application Submittal

Applications may be submitted by mail or email to the Clerk's Office:

Mail:
City Clerk's Office
Attn: Get Involved
300 Monroe Ave NW, 2nd Floor
Grand Rapids, MI 49503

Email: getinvolved@grcity.us