



## APPOINTMENT APPLICATION TO TOWNSHIP BOARD, COMMITTEE OR COMMISSION

To assist the Township in making appointments to the various volunteer boards, committees, and commissions, please complete the application, sign and return it to:

**Clerk's Office**  
**Charter Township of Northville**  
**44405 Six Mile Road**  
**Northville, MI 48168-9670**

**Phone: (248)348-5825**  
**FAX: (248)348-9889**  
**Email: clerk@twp.northville.mi.us**

To be appointed to a board, committee or commission seat, you must be a registered voter, a resident of the Township, and you must not be in default to the Township. The term of each board, committee or commission appointment varies and each appointee must be recommended by the Township Supervisor and the appointment is to be approved by the Board of Trustees.

I, \_\_\_\_\_ have lived in the Township for \_\_\_\_\_ year(s)\*  
(PRINT NAME)

at \_\_\_\_\_ in Subdivision and/or area \_\_\_\_\_  
(STREET ADDRESS)

SSSSSSSSSSSSSSSSSS, MI \_\_\_\_\_ My phone number is (c) \_\_\_\_\_ (w) \_\_\_\_\_  
(CITY) (ZIP CODE)

My email address is \_\_\_\_\_

Check the board, committee or commission that you would like to apply for:

Beautification Commission	Ethics Board
Board of Review	Historic District Commission
Building Authority	Northville Youth Network
Building Department Board of Appeals	Planning Commission
Economic Development Corp/Brownfield Redevelopment Authority	Senior Advisory Commission
Election Board of Canvassers	Zoning Board of Appeals

Why are you interested in serving on the board, committee or commissions that you chose?

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Give a brief summary of your educational background:

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Give a brief summary of your employment background:

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Give a brief summary of your past and/or current civic involvement:

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What particular expertise would you bring to the particular board, committee or commission that you would like to be appointed?

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Please list three personal and/or professional references:

1) Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_  
Email \_\_\_\_\_

2) Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_  
Email \_\_\_\_\_

3) Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_  
Email \_\_\_\_\_

I, \_\_\_\_\_ hereby affirm that the above information is true and  
(Signature)  
complete to the best of my knowledge and belief.

Date: \_\_\_\_\_

Applications are forwarded to the Supervisor and the Board of Trustees and are kept on file for three years. If you have not been appointed in that period, you will need to re-apply.

\*Minimum residency of one (1) year required for Ethics Board

