



Michigan Association of Municipal Clerks

APPLICATION FOR BOARD DIRECTORS

I, _____, do hereby make application for:

(check those of interest)

_____ Third Vice President
_____ Director
_____ Secretary
_____ Treasurer

to serve on the Board of Michigan Association of Municipal Clerks.

_____ Last Name First Name Initial

_____ Municipal Employer

_____ City County

_____ Title Year Elected/Appointed

_____ Population of Municipality You Serve

_____ Other Related Municipal Experience

_____ Municipality Title Years

_____ Previous service to the organization

_____ Member of MAMC IIMC

_____ Number of State Conferences attended IIMC Conferences

_____ Are you a member of any regional Clerk's Associations?

