

Signature

Lewis County Citizen Advisory Boards/Commissions/Committees Application

Appointment will require regular meeting attendance that is usually held monthly and in the evening. You may attach a resume or other relevant information if desired. If you are not chosen at this time, would you like us to keep your application on file for future appointments? Yes No

Return completed form to: <u>BOCC@lewiscountywa.gov</u> Lewis

County Commissioners Office 351

NW North St.

Chehalis, WA 98531

ame:			
ddress:Street address/PO Box			
Street address/PO Box	City	State	Zip Code
hone: Home:	Cell:		
-Mail Address:			
occupation:			
commissioner District #: How many hours a	are you willing to comm	nit?	
Which Advisory Board/Commission/Committee in	terests you?		
riefly describe why you would like to serve.			
meny describe why you would like to serve.			
What community organization do you currently vo	olunteer with or have y	ou volunteere	d with in the past?
Describe your qualifications and skills that would	be of benefit.		
ist your educational background and area of stud	dv.		
List your educational background and area of stud	ay.		

Date