## Lexington- Fayette Urban County Government Boards and Commissions Application

|  | Return To: Office of the Mayor Attn: Boards and Commis 200 E Main Street Lexington KY 40507-1310 FAX (859) 258-3194  |         | Name of Board or Commission fo | or Consideration |              |  |
|--|--|---------|--------------------------------|------------------|--------------|--|
| Please Indicate address you would like to receive board or commission correspondence | Mr. Ms. Mrs.<br>Other:   |         |                                |                  |              |  |
|  | Home Address   |         | City                           | State            | Zip          |  |
|  | Business Name & Address  |         |                                |                  |              |  |
|  | Race:  | Mobile: |                                |                  |              |  |
|  | EDUCATION AND GENERAL QUALIFICATIONS:  |         |                                |                  |              |  |
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|  |  |         |                                |                  |              |  |
|  |  |         |                                |                  |              |  |
|  |  |         |                                |                  |              |  |
|  | MEMBERSHIP IN ORGANIZATIONS AND CURRENT POSITIONS:   |         |                                |                  |              |  |
|  |  |         |                                |                  |              |  |
|  |  |         |                                |                  |              |  |
|  |  |         |                                |                  |              |  |
|  | REFERENCES: List two persons not related whom you have known for one year.   |         |                                |                  |              |  |
| -  | Name   |         | Address                        |                  | Phone Number |  |
|  |  |         |                                |                  |              |  |
|  |  |         |                                |                  |              |  |
|  | <u>PLEASE NOTE</u>   |         |                                |                  |              |  |
|  | Complete all sections of the application <b>and</b> attach a current resume of no more than two (2) pages.<br>The Authorization for Records Check must accompany your application. |         |                                |                  |              |  |
|  | Applications will NOT be considered without this form.   |         |                                |                  |              |  |