



**Application for Appointment**  
City of Forest Acres Boards and Commissions

The Forest Acres City Council will use the information contained in this application and the attached resume for consideration of appointments. The information presented will become part of the resource file for potential appointments.

Members appointed by the City are requested to serve until the expiration of his/her respective term, but may resign upon written notice to the City. Likewise, the City may choose to end a Member’s service prior to the end of the term and may do so for any reason whatsoever upon written notice to such member.

Members are reminded that they represent the City and are expected to conduct themselves accordingly.

FULL NAME \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_ # OF YEARS \_\_\_\_\_

CITY, ST, ZIP \_\_\_\_\_

HOME PHONE ( ) \_\_\_\_\_ BUSINESS PHONE ( ) \_\_\_\_\_

MOBILE PHONE ( ) \_\_\_\_\_ EMAIL: \_\_\_\_\_

**Note below the name of the Board or Commission that you are applying for**  
(Example- Planning Commission, Code Board of Appeals and Zoning Board of Appeals, etc.):

\_\_\_\_\_ REQUESTING RE-APPOINTMENT

1. Why do you wish to serve on a City of Forest Acres board or commission?
  
2. What special contributions do you hope to make?
  
3. What training/qualifications do you have for this particular board or commission?

OVER →

4. Are you currently a member, or have you previously served on a City board or commission? If so, which one(s), and when did you serve?

5. Please list any volunteer experience you have had which may benefit the City. Please also list any service or civic organization of which you have been a member:

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**AREA OF EXPERTISE**

Please indicate the area(s) of expertise that you can bring to the above board(s), and then, in detail, list education, experience, reasons for your interest, and other factors that support your interest in serving (use additional sheets if necessary).

**Legal    Technical    Fundraising    Public Speaking    Business Management    Other**

Please explain:

**I understand that this application will be on file for no longer than two (2) years. I understand that I will need to resubmit a new application should I wish to be reappointed to my seat. Information on this form will be considered public information.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Please submit completed application to:**

City of Forest Acres, Administration  
Maria Queen  
5209 N Trenholm Rd.  
Forest Acres, SC 29206  
[mqueen@forestacres.net](mailto:mqueen@forestacres.net)

FOR OFFICE USE ONLY

Received Date:	Appointed to:	Term Dates:	Recommended by:
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ATTENDANCE RECORD:      Excellent      Good      Fair      Poor