



Application Date: ___/___/___

Boards/Commissions of Interest:

- | | |
|---|--|
| <input type="checkbox"/> Blood Commission | <input type="checkbox"/> Board of Fire and Police Commissioners |
| <input type="checkbox"/> Civil Service Commission | <input type="checkbox"/> Community & Economic Development Commission |
| <input type="checkbox"/> Community Relations Commission | <input type="checkbox"/> Firemen's Pension Board |
| <input type="checkbox"/> Planning & Zoning Board | <input type="checkbox"/> Police Pension Board |
| <input type="checkbox"/> Veterans Memorial Commission | <input type="checkbox"/> General volunteer for events |

Name:
Home address:
If Streamwood resident; length of residency:
Best phone # to reach you:
Email address:

Community Involvement: (Please tell us about any service opportunities you have participated in; please start with most current)

Organization:	Dates of service:
Location:	Position held:
Describe work performed:	

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Location:	Position held:
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Location:	Position held:
Describe work performed:	

Employment Experience: (Please start with most current)

Employer:	Dates of employment:
City:	Position held:
Describe work performed:	

Employer:	Dates of employment:
City:	Position held:
Describe work performed:	

Employer:	Dates of employment:
City:	Position held:
Describe work performed:	

Education and Training:	
Institution name:	Location:
Dates attended:	Degree/Certificate earned:
Area of study:	

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Dates attended:	Degree/Certificate earned:
Area of study:	

Personal References: (Please provide three)	
Name:	Email address:
Name:	Email address:
Name:	Email address:

Additional Information:
Why do you want to serve the community currently?
What qualifications, experience, or interests do you have that make you suited for this board or commission?

Are you willing and able to complete an online Open Meetings Act training session? Yes No

Applicant Signature: _____

Please return completed application to:
 Village of Streamwood, Attention: Village President
 301 E Irving Park Road, Streamwood, IL 60107
mayor@streamwood.org

For Office Use Only:	
Appointed to:	
Appointment date:	Swear-in date:
Term of appointment:	<input type="checkbox"/> Member <input type="checkbox"/> Alternate
Village President Signature:	