

Application for Cass County Board or Commission

Board or Commission Name

Applicant's Name

Address

Home/Cell Phone

Business Phone

Email Address

Current Employer

Job Title

Qualifications

Please Provide References

First Reference

Second Reference

Name

Address

Phone

Email

Relationship

I certify that there is nothing that would prohibit me from serving on this board or commission.

Signature

Date

Return to: Cass County Supervisors
C/O Cass County Auditor
5 West 7th Street
Atlantic, IA 50022

Phone: 712-243-4570
Fax: 712-243-4572
auditor@casscoia.us
www.casscountyia.gov

Applications will be retained for one year.

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