



# BOROUGH OF EDINBORO

124 Meadville Street  
Edinboro, PA 16412-2502  
(814) 734-1812 ext. 123 / Fax: (814) 734-4492

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## APPLICATION FORM FOR PERSON DESIRING APPOINTMENT

TO: \_\_\_\_\_  
(name of board, commission, etc.)

1. Name: \_\_\_\_\_
2. Address: \_\_\_\_\_
3. Phone: \_\_\_\_\_
4. E-mail: \_\_\_\_\_
5. Current or past participation in civic organizations: \_\_\_\_\_  
\_\_\_\_\_
6. Occupation: \_\_\_\_\_
7. Have you ever served on a Board or Commission in Edinboro or any other Community?  
Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, which one \_\_\_\_\_ where \_\_\_\_\_
8. Are you willing to be interviewed for this position? Yes \_\_\_\_\_ No \_\_\_\_\_
9. What time would be best to meet for the interview \_\_\_\_\_ A.M. \_\_\_\_\_ P.M.
10. Please state your reasons for desiring an appointment to the Board:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature

Date