



CITY OF SAGINAW

BOARDS – COMMISSIONS – COMMITTEES - AUTHORITIES

APPLICATION AND AFFIDAVIT OF ELIGIBILITY

Thank you for your interest to serve the City of Saginaw. For consideration of appointment or reappointment complete the application and return via email to clerk@saginaw-mi.com, fax to 989.759.1447, mail to City Clerk’s Office, 1315 S. Washington Ave., Saginaw, MI 48601 or apply online at www.saginaw-mi.com.

I AM APPLYING FOR

Board, Commission, Committee or Authority: _____

GENERAL INFORMATION

Name: _____ Are you a U.S. citizen? Yes No
Last First Middle

Address: _____
Number Street City State Zip

Employer: _____
 Business Address: _____ How long have you lived continuously in the City of Saginaw? _____

Email Address: _____

Phone #: Home: _____ Work: _____ Cell: _____

CONFIDENTIAL IDENTITY VERIFICATION

SSN Last 4 Digits ONLY: _____

EDUCATION

College, Trade, or Other School Attended	Major/Minor or Other Degree	Date Graduated or Dates of Attendance
_____	_____	_____
_____	_____	_____

Professional Qualifications and/or Work Experience:

AFFIDAVIT OF ELIGIBILITY

1. I hereby certify that I am not in default with the City of Saginaw. Default means I owe past due monies or have failed to make required Income Tax filings. **City Charter requires that I am not in default to the City of Saginaw.**

2. I hereby certify that I have not been convicted of any felony other than those listed below or on a sheet attached to this Affidavit.

3. I hereby certify and attest that the foregoing information is factual and true.

Applicant Signature

Date

EXPERIENCE/REFERENCES

Community Activities and/or Experience:

References: List 3 references with name/address/telephone #

Reasons for desire to serve:
