



201 W. Main St. • P.O. BOX 68 • Warsaw, MO. 65355
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welcometowarsaw.com

City of Warsaw Board Member Application

Name: _____

Telephone Number: (____) _____

Please include area code

Home Address: _____ Apt No. _____

City: _____ State: _____ Zip Code: _____

E-Mail: _____

Year Current Residence in Warsaw Began: _____ *Enter year only ie; 1953*

Check Which Board(s) You Are Interested In: "X" boxes

- ADA Advisory Board
- Airport Board
- Board of Adjustment
- Board of Appeals
- Parks & Recreation Board
- Planning and Zoning Commission
- Other: *Please list* _____

Special Qualifications for Specific Board(s): *Include past board services*

Education Background:

Community Involvement:

Are you related to any Employee or Official of the City of Warsaw Yes No

If Yes, name of person: _____ Relationship: _____

Signed: _____ Date: _____ mm/dd/yy