Application for Appointment to the Hall County/ Grand Island Convention and Visitors Bureau

Please list any other Boards or Commissions which you are currently serving on or previously have served on:

F	Personal Information
Name:	
(please type or print last name, first name, and r	niddle initial)
Legal Residence:	
Street	
City	
State Zip	
County	
Business Name and Address	
Street	
City	
StateZip	
County	
Home Phone: ()Cell/Pager: ()
Work Phone: ()	
Email Address:	
Occupation:	

Are you a United States Citizen or legally able to work in the United States?
Que Yes
No

Are there currently or has there ever been any disciplinary actions, suspensions or revocations of any licenses that you have been issued by any agency of federal, state or local government?
□ Yes □ No

If Yes, explain the circumstances on a separate sheet and attach to application.

I hereby certify that neither I, nor any member of my immediate family, nor any other party having influence over me, has a material, personal or financial interest with any matter, under the discretion or jurisdiction of the board or commission for which I applied. I further certify that no other relationship, bias or ethical conflict exists which will prevent me from fulfilling my duties if appointed. Difference No

If Yes, explain the circumstances on a separate sheet and attach to application.

Statutes require some board appointees meet specific employment criteria. List employment beginning with the most recent experiences. A resume or additional information is optional.

Employer:			
Occupation:		 	
Location:		 	

Dates:

Additional Information

Please list additional supportive information about yourself, your experiences, and background, including any board or commission you have served on in the past, honors or awards you have received, and other volunteer activities.

AREAS OF INTERE	EST:	Agriculture	Cultural	Economic Development	Education	
Environment	Finance	Government	Health	Human Services	Labor	
Volunteering	_Legal/Law	Enforcement	Transporta	tion		
Other:		_				

References

List names, addresses, and phone numbers of at least three people who may be contacted for references:

- 1.
- 2.

3.

Please note that completed applications and additional application material that you provide may be subject to public information requests.

Appointments are subject to confirmation by the Hall County Board of Supervisors. One area of inquiry will be whether you or your spouse have a conflict of interest. An investigation into your background may be conducted prior to your appointment. I hereby grant the Hall county Convention and Visitors Bureau permission to conduct a background check.

If appointed, I pledge my best efforts to resolve, before assumption of office, any conflicts of interest that would be inconsistent with my responsibilities as a Hall County appointee.

Name (please print) :_____

Signature: _____

Date _____

Return completed form to: Brad Mellema, 2323 South Locust St Suite C. Grand Island, NE 68801 308382-4400