

Al Hoyle, Mayor  
Sharon Nelson, City Clerk



COUNCIL MEMBERS:  
Ruth Caudell Al Fuller  
Kathryn Lancey Lynelle Stewart  
David Westmoreland

# CITY OF ELLIJAY

*Georgia's Apple Capital*

## **BOARDS, COMMISSIONS, AUTHORITIES, AND ADVISORY COMMITTEES MEMBERSHIP GENERAL APPLICATION FOR APPOINTMENT**

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
City/Zip: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
E-mail address: \_\_\_\_\_

Are you a resident of the City? \_\_\_ Yes \_\_\_ No      How long? \_\_\_\_\_  
Are you a resident of the County? \_\_\_ Yes \_\_\_ No      How long? \_\_\_\_\_  
Are you a business owner in the City? \_\_\_ Yes \_\_\_ No      How long? \_\_\_\_\_  
Are you a business owner in the County? \_\_\_ Yes \_\_\_ No      How long? \_\_\_\_\_

Board/Commission/Authority/Committee applied for: \_\_\_\_\_  
New appointment: \_\_\_\_\_ Reappointment: \_\_\_\_\_

Please list any current membership(s) you have on any City of Ellijay Board, Commission,  
Authority, or Committee: \_\_\_\_\_  
How long have you served on the above listed entity? \_\_\_\_\_

Name/address of employer: \_\_\_\_\_

Occupation: \_\_\_\_\_

Educational Background: \_\_\_\_\_

Please state why you would like to serve on this Board? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DATE APPLICATION RECEIVED \_\_\_\_\_

APPLICANT MEETS/DOES NOT MEET BOARD REQUIREMENTS: \_\_\_\_\_