QUESTIONNAIRE FOR APPOINTMENT OF GREENE METROPOLITAN BOARD MEMBERS

PLEASE PRINT IN INK OR TYPE Reappointment New Appointment		BOARD	
(First) (Middle)	(Last)	Dat	te of Birth
2. Address			
(Street)	(City)	(Zip)	
Telephone Number(Home)			(Work)
E-mail Address (optional)			
3. How long have you been a res	sident of Greene County?		
4. What is your occupation?	l, please give former occupation	n noting you a	re now retired)
Place of employment?			
What are your usual working	hours?		
5. Education completed: Grade S	School High School	_College	Graduate School
6. Are you related to any Elected	Official, Department Direct	ctor or Cour	nty employee?
Yes No If yes, plea	se list:		
7. Have you ever been convicted Each conviction will be judged on its own me you are applying.) Yes No	erits with respect to time, circumsta		ot necessarily ban you from an appointment. sness based on the board appointment for which
If Yes, please explain:			

9. Please state on the reverse side of this form your reasons for wanting to serve on the board. Highlight specialized interests or experiences that you feel would make you qualified for serving. If you need additional space, please attach another sheet of paper.

Once the form is completed, please sign and return to: GN Detroit Street, Xenia, Ohio 45385. The form can also be f	
Your signature represents that the information which appear of your knowledge.	ears on this form is true and factual to the bes
Signature	Date
If you have any questions, please contact Brenda Smallwood	od at 937-352-0264.