



# City of Fulton

## Board/Commission Application

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
(Street) (City/State/Zip)

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Do you live within the corporate limits of the City of Fulton? Yes/No

How long have you been a resident of the City of Fulton? \_\_\_\_\_

Which Board or Commission are you interested in serving as a member? \_\_\_\_\_  
\_\_\_\_\_

Why are you interested in serving on a City of Fulton Board/Commission? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What experience and/or skills do you have that might especially qualify you to serve on a City of Fulton Board/Commission?

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

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please return completed form to:** City of Fulton, Attn: Mayor Cannell, 18 E. 4<sup>th</sup> Street, P.O. Box 130, Fulton, MO 65251 or email to [mayor@fultonmo.org](mailto:mayor@fultonmo.org).