

# COMMITTEE, ELECTION JUDGE, & VOLUNTEER APPLICATION



## Contact Information

Name	
Street Address	
City, State, Zip	
Home Phone	
Work Phone	
Email Address	

## Special Interests

Are you interested in serving in a specific interest area? (Select all that apply)

- Election Judge, if checked Party Affiliation: \_\_\_\_\_
- Economic Development Authority
- Planning & Zoning Commission
- Parks & Trails Committee
- Other \_\_\_\_\_

## Interests

As the Council prioritizes its goals, new committees or task forces may be created from time to time. If you have other areas of interest, please list them below. Your application will be kept on file for future opportunities.

Other interests: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Personal Information

Are you currently a high school student?    No     Yes     Grade \_\_\_\_\_

Please list any civic, professional, or community activity involvement:

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

Why are you interested in assisting the City of Madison Lake?

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

Do you have any known or potential conflicts of interest? No \_\_\_\_\_ Yes \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

**Special Skills or Qualifications**

Summarize any special skills or qualifications you have gained from employment, previous volunteer work, hobbies, or other activities:

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

Any Additional Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Agreement and Signature**

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a committee member, election judge or volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

Name (please print)	
Signature	
Date	

**Equal Opportunity Policy**

The City of Madison Lake provides equal opportunities without regard to race, color, religion, national origin, gender, sexual orientation, age, or disability.

Thank you for completing this application form and for your interest.

Please return this form to:

**City of Madison Lake**  
525 Main Street  
P.O. Box 295  
Madison Lake, MN 56063  
Phone: 507.243.3011  
Fax: 507.243.4330

**Attn: Liz Wille, City Administrator**  
Email: [lwille@madisonlakemn.gov](mailto:lwille@madisonlakemn.gov)