

PLEASE LIST GROUPS OR
ACTIVITIES YOU PARTICI-
PATE IN

I AM INTERESTED IN
SERVING ON THE BOARD(S)
AND/OR COMMISSION(S) AS
INDICATED

PLEASE NUMBER IN
ORDER OF PREFERENCE

Charter Ordinance
Committee

Convention & Tourism

Tree Board

Library Board

Housing Advisory &
Appeals Board

Building Trades Board

Planning Commission

Iola Pride Committee

Public Housing
Authority

Recreation Advisory
Committee

Board of Zoning
Appeals

SIGNATURE: _____

Please return to the City Administrator's Office, City Hall



City of Iola, Kansas

APPLICATION FOR SERVING ON THE HOUSING REHABILITATION AND CITIZENS ADVISORY BOARD

Name: _____

Address: _____

Business Telephone _____ Home Telephone _____

How long have you been a resident of Iola? _____

Briefly describe why you are interested in serving on this Board for the City of Iola?

Please list any groups or activities that you participate in.

SIGNATURE: _____ DATE: _____

**“Thank you for your interest in serving on this Board.
It is rewarding to see individuals who are willing and able to
commit their time and energy to make the City of Iola a better
place to work, live and play.”**