## Town of Ixonia Committee/Board/Commission Questionnaire

Thank you for your interest in becoming involved with a Town of Ixonia Committee or Board.

As you may already know, the Chairman recommends all citizen appointments to the Town Board for approval. Please provide them with some information to use when considering your appointment by completing the questions below. Also, you are welcome to attach additional information which may further support your appointment.

Name: (as you like to be addressed) _	
Address:	
Phone # (work/home):	Cell Phone #
E-Mail:	
Years as Town of Ixonia Resident:	
What Town committee(s) are you curre	ntly serving on, if any?
If you are currently serving on a comm (circle one) Yo	ittee, would you like to be re-appointed? es No
Committee/Board/Commission you are	interested in:
Why are you interested in serving on th	nis particular committee/board:
Qualifications for serving on this comm	nittee/group:
Other Community Involvement:	
Occupation / Employer:	
Signature:	Date: