BOARD/COMMISSION APPOINTMENT INTEREST FORM

I am interested in the following board(s)/commission(s):	
Name (please print):		Own orRent?
Address:	City:	, IN Zip Code :
Phone Number:	Email Address:	
How long have you continuously live	ed in Shelby County? years	months
Employer:	Are you 21 years	s of age or over? Yes No
Township (please check one):		
AddisonBrandywineHa	noverHendricksJackson	LibertyMarionMoral
NobleShelbySugar Cree	ekUnionVan BurenWasl	hington
I reside in (please check one):		
Unincorporated Shelby County	City of ShelbyvilleTown of Edin	burghTown of Fairland
Town of MorristownTown of	Saint Paul	
Political Affiliation (please check one):DemocratRepublicanC	Other
Have you ever been convicted of a fe	lony?YesNoPrefer not t	to answer
Please list all other board positions o	or offices you currently hold:	
You may attach a separate page or r	nce you have in matters related to the esume if necessary.	
I certify that the information above is true and guarantee of appointment to any board/commi	correct to the best of my knowledge. I understan	ed that this is an interest form and there is no
Signature:	Date:	

The above information will help determine whether you are qualified under Indiana law to fill the position(s) you are seeking. Please return this form by email to aglackman@co.shelby.in.us or by postal mail to Shelby County Auditor, 25 W. Polk St. Rm 104, Shelbyville, IN 46176 or in person at the Shelby County Auditor's office. Paper forms will also be made available for pick-up.