Village of Grass Lake 119 North Lake Street, P.O. Box 737

Grass Lake, Michigan 49240

Phone: 517-522-4550 Fax: 517-522-8120



Planning Commission Board Application

Name			
Home Address			
City	State	Zip Code	
Board members must be residen	ts of the Village of Gra	ss Lake	
Home Phone	Work Phone	Cel	ll Phone
Email Address			
Current Occupation / Employer _			
Areas of Experience / Skills (plea	se check all that apply)	
Business / Financial Mgmt	Fund	Development	IT / Technology
Non-Profit Management	PR /	Marketing	Legal
Strategy / Business Dev	Dow	ntown Development	Data Analytics
Org & Communication	Outro	each / Advocacy	Entrepreneurship
Other areas of expertise / skills /	interests?		
Other community, volunteer, Bo	ard experience (past /	current):	
Membership in Civic/Professiona	al Associations		
Why are you interested in servin	g on the Planning Com	mission?	

How do you feel Grass Lake will benefit from your involvement on the Board?	
Do you have any personal or business interest that could create a conflict (either real or perceived) if appoplease explain)	
Board meetings are typically the 1 st Thursday of the month at 6:30pm. Will this generally work with your s Do you accept the commitment to read Planning Commission materials and come to meetings prepared? Are you open to a leadership role on the Board or on an associated Committee? Are you willing to engage in additional Planning Commission efforts outside of the monthly meetings?	
Please allow my name to stand for nomination to The Village of Grass Lake Planning Commission.	
Si	ignature
	Date