

MORTON COUNTY AUXILIARY BOARD APPLICATION FORM



Name:

Address:

Home Phone:

Work Phone:

Email:

Board or Commission on which you prefer to serve:

List below the skills or qualifications you could bring to this Board or Commission:

If you have any special interest or reason for serving on this Board or Commission, please explain below.

Principal Occupation/Source of Income (check one)

- | | | | |
|-------------------------------------|------------------------------------|---|---|
| <input type="checkbox"/> Farmer | <input type="checkbox"/> Military | <input type="checkbox"/> Investor/Retired | <input type="checkbox"/> Clerical & Sales |
| <input type="checkbox"/> Laborer | <input type="checkbox"/> Craftsman | <input type="checkbox"/> Business Owner | <input type="checkbox"/> Professional |
| <input type="checkbox"/> Government | <input type="checkbox"/> Student | <input type="checkbox"/> Other | |

List the name of each business or trust that is NOT the principal source of income, in which you have a financial interest:

List below the associations or institutions with which you are closely associated, or serve as a director or officer:

Signature: _____ Date: _____

Please return application to: Dawn R Rhone, Morton County Auditor – 210 2nd Ave NW – Mandan, ND 58554