



Application for Advisory Commission

Thank you for your interest in applying for appointment/reappointment to a City of Mahtomedi advisory position. It is the effort and interest of individuals like you who help make this City a community.

As part of reviewing your application, the City Council would like you to answer the following questions. Your answers will be reviewed individually by Council members prior to any appointment decisions. There are no right or wrong answers to these questions. The questions are intended to help the City Council get to know you better as they make appointments.

Date	(Last)	(First)
Street Address		Phone (H)
How long have you lived in Mahtomedi?		Years
Occupation		Phone (W)
Employer		
Email Address		

Please indicate which volunteer position you are applying for. List only those you would be seriously interested in serving on.

1st Choice _____

2nd Choice _____

3rd Choice _____

4th Choice _____

- 1. What do you see as the primary issues facing the City of Mahtomedi?**
- 2. If you could facilitate one single accomplishment while serving in an advisory capacity, what would that be?**
- 3. Please provide us with a brief description of the vision you have for the City of Mahtomedi during the next ten years.**
- 4. Please list any attributes, strengths, qualifications, experiences, etc., that you believe will be of benefit to the City of Mahtomedi.**

**Return to: City Administrator
City of Mahtomedi
600 Stillwater Road
Mahtomedi, MN 55115**

Date Received _____
(for office use only)

**Email: sneilson@ci.mahtomedi.mn.us
Office: 651-426-3344
Fax: 651-426-1786**