

**BOARDS, COMMITTEES AND COMMISSIONS  
APPLICATION**

Please complete this application in its entirety and return to the address below:

Anderson County Council  
c/o Clerk to Council  
P. O. Box 8002  
Anderson, SC 29622

All applications will be considered by County Council and appointees will be mailed written confirmation of Council's decision.

Name: \_\_\_\_\_  
Last, First, Middle Initial

Board(s) and/or committee(s) in which you are interested:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Physical Address and Mailing Address, if different:

\_\_\_\_\_ Physical

\_\_\_\_\_ Mailing

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Preferred method of contact: \_\_\_\_\_

County Council District: \_\_\_\_\_ GED Equivalent: Yes or No

Highest Level of Education: \_\_\_\_\_ High School Grad: Yes or No

College Attended: \_\_\_\_\_ Degree: \_\_\_\_\_

Address of College: \_\_\_\_\_

Employment History:

<u>COMPANY</u>	<u>POSITION</u>	<u>EMPLOYMENT DATES</u>
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\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

Recommendation of Council: \_\_\_\_\_