



Application for City Commission Appointment

Submit to: City Hall, 106 1st Street East, Polson, MT 59860

Ward you are applying for: _____ Ward 1 _____ Ward 2 _____ Ward 3

Applicant Name: _____

Home Address: _____

Do you reside within the Polson City Limits?* YES: NO:

How long have you lived in Polson? _____

Home Telephone: _____ Work Telephone: _____

Email: _____

Occupation: _____

Place of Employment: _____

Why do you want to become a Commissioner?

How do you feel you will best contribute as a Commissioner?

Signature of Applicant: _____ Date: _____

*For this purpose, "reside" means are you registered to vote within the Polson City Limits. Information on this application is public information. The information provided herein is true and complete. A false or misleading statement may be cause for elimination from consideration.