



KOOTENAI COUNTY

BOARD OF COMMISSIONERS

MARC EBERLEIN • CHRIS FILLIOS • BOB BINGHAM

Advisory Board Membership Application

Applicant Name _____ Date _____

Address _____

How Long Have You Been a Resident of Kootenai County? _____

Do You Live in an Incorporated City Within Kootenai County? Yes No

Home Phone _____ Business/Other Phone _____

Email Address _____

Present Employer _____ From: _____ To: _____

Please List the Highest Level of Education Achieved (Include School Name and Certificate or Diploma/Degree Received) _____

Advisory Boards

**Please indicate your choices by number in order of preference (first choice being "1")
Choose no more than 3**

- | | |
|----------------------------------|-----------------------------------|
| Airport Advisory Board | Aquifer Protection District Board |
| Board of Community Guardians | North Idaho Fair Board |
| Historic Preservation Commission | Natural Resource Advisory Board |
| Noxious Weed Advisory Board | Planning and Zoning Commission |
| Snowmobile Advisory Board | Parks & Waterways Advisory Board |

Why are You Interested in This Position? _____

What Particular Strengths Would You Bring to this Position? _____

What Do You Believe is the Role of the Advisory Board in Our Community? _____

Recommended by _____

Please List Boards and Committees that You Serve on, or Have Served on (Business, Civic, Community, Fraternal, Political, Professional, Recreational, Religious, Social)

Organization	Role / Title	Date of Service

Can You Perform the Essential Functions of Being a Member an Advisory Board, With or Without Reasonable Accommodation? Yes No

I Certify That the Answers I Have Made to Each and All of the Foregoing Questions Are True to the Best of my Knowledge and Belief.

_____ _____
Date Signature

Thank You for Applying!

Please note that all application materials submitted will become public record once submitted and may be disclosed under the Idaho Public Records Law, per Idaho Code §74-101(1), §74-101(12), and §74-106(1).

RETURN TO: Kootenai County Commissioners
PO Box 9000
451 N. Government Way
Coeur d’Alene, ID 83816
(208)446-1600 Fax (208)446-2178
Email: kcbocc@kcgov.us

Kootenai County does not discriminate against individuals or groups on the basis of disability in the admission access to, or treatment in, its public meetings, programs, or activities. Requests for assistance or accommodations can be arranged by contacting the Board of County Commissioners Office at (208) 446-1600.

Office Use Only	
___	Nominee was referred by _____
___	Nominee was mailed application packet _____
___	Nominee packet was received on _____
___	Nominee had meeting with Board Chair, Board member, or BOCC on _____
___	Nominee application was reviewed by BOCC on _____
___	Nominee was interviewed by the Board on _____ BOCC on _____
Action taken by the BOCC _____	
If appointed, date appointment letter mailed _____	
Name of Advisory Board _____ Term length _____	