City of North Kansas City
Boards and Commissions Application Form

Thank you for your interest in being a member of a board or commission for the City of North Kansas City. In order to be considered for an appointment, please complete the following form. For questions regarding the boards, or this form, please contact Crystal Doss, City Clerk, at (816) 412-7815.

Name: ________________________________________ Date: ____________________

Address: ______________________________________________________________________

City: __________________________ State: ___________________ Zip: __________

Phone Number: __________________________ E-Mail: _______________________

Please mark each board or commission for which you are interested in serving:

☐ Hospital Board of Trustees (4-Year Term)
☐ Library Board (3-Year Term)
☐ Park & Recreation Board (3-Year Term)
☐ Board of Zoning Adjustment (4-Year Term)
☐ Police & Fire Personnel Board (4-Year Term)
☐ Liquor Control Board of Review (3-Year Term)
☐ City Planning Commission (4-Year Term)
☐ Tax Increment Financing (TIF) Commission (4-Year Term)
☐ Industrial Development Authority
Why are you interested in serving the City of North Kansas City on a board or commission? Do you have an interest in a particular board or commission and if so, why?

_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________

Do you have previous civic experience or particular qualifications that you believe you can bring to the board or commission? If so, please describe in the space below. If you have a current resume, please attach *not required*.

_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________

Please describe the days of the week, times of day, or evenings you are available.

_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________

If there are no vacancies for the board you are interested in, we will contact you when a vacancy becomes available to determine if you are still willing and able to serve at that time.

Thank you for your interest in serving your community!