

APPOINTMENT APPLICATION

Board/committee/commission: _____

Name: _____ Preferred Name: _____

Mailing Address: _____ Home Address: _____

Phone: _____ Spouse: _____

Occupation: _____ Self-Employed? _____

Employer/Name of business: _____

Address / Zip: _____ Phone: _____

Year Employed: _____ Years of Laramie County Residency: _____

Fax: _____ Email: _____ Cell: _____

Education/Degrees: _____

Other community memberships: _____

Please explain your interest in serving on this Board/Committee/Commission (attach additional pages if needed):

Signature: _____ Date: _____

Please return to: Laramie County Commissioner's Office
310 W 19th St, Room 300
Cheyenne, WY 82001
Fax: 307-633-4267
Email: commissioners@laramiecounty.com
Phone: 307-633-4260

=====For Office use Only=====

New Appointment: _____ or Reappointment: _____ Term Length: _____ Year(s)

Full Term: _____ or Unexpired Term: _____ Expiration Date: _____

Comments: _____
