



James R. Fouts, Mayor
One City Square, Suite 215
Warren, MI 48093-6726

City Commission / Board Application

Commission / Board applied for: _____

Name: _____

Address: _____ Zip: _____

Phone: Home: (____) _____ Work: (____) _____ Cell: (____) _____

Email Address: _____

Driver's License Number (**for internal use ONLY**):

Number of Years a Warren Resident: _____ Warren Business Owner? _____
(Name of Business)

New Appointment Request

Re-Appointment Request

Please Note: Conviction of a crime will not necessarily preclude you from being appointed to a City of Warren Commission or Board.

Have you ever been convicted of a felony? YES _____ NO _____

Do you have any felony charges pending against you at this present time? YES _____ NO _____

If so, please complete the following:

Date of offense: _____ Offense Description: _____

Where: _____ Disposition: _____

Work Experience: _____

(Continued on reverse side)

Education: _____

Affiliations (Clubs, Fraternal, Military, Church, etc.): _____

Political Offices held, if any (Please include dates of service): _____

Please feel free to add any additional information: _____

***NOTE: All potential appointments:**

- **Prior to appointment, a background investigation will be conducted; and**
- **Applicant must be current on all outstanding taxes, water bills, permit fees or special assessments that are past due prior to date of appointment**

Please return this application to the Mayor’s Office

**City of Warren
One City Square – Suite 215
Warren, MI 48093-6726
Phone: (586) 574-4520
Fax: (586) 574-4524
Email: mayor@cityofwarren.org**