



Lori M. Stone, 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  
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Fax: (586) 574-4524  
Email: [mayor@cityofwarren.org](mailto:mayor@cityofwarren.org)**