



APPLICATION FOR CITY COUNCIL

Vacant Zone 4 Seat

Mr./Ms./Mrs. _____

Employer _____

Home Address _____

Business Address _____

City _____ Zip _____

City _____ Zip _____

Home Phone _____

Business Phone _____

E-mail address _____

Do you live in the Springfield City Limits? Yes _____ No _____ If yes, how long? _____

Previous employers and positions _____

Special Qualifications _____

Educational Background _____

Community activities and offices held _____

References _____

Please attach resume.

Signature: _____

Date: _____