



CITY OF LAVONIA

"A GEORGIA CITY OF EXCELLENCE"

Board/Commission/ Authority Application Form

Complete this form and return to: **Lavonia City Hall, P.O. Box 564, Lavonia, GA 30553**

Name _____ Phone _____

Address _____ Email _____

For which Board/Commission/Authority are you applying? _____

1) What is your vision for this Board position?

2) Relevant community and/or professional experience.

3) Have you previously served on other Boards? If so please list.

4) Why are you interested in serving as a Board Member?

5) Area(s) of expertise/contributions you feel you can make as a Board Member.

6) If not appointed to this Board/Commission/Authority, are you willing to serve on any others? If so please list.