



B E R R I E N C O U N T Y

*A Full Service Community*

3000 Washington Avenue  
P.O. Box 147  
St Joseph, MI 49085

Telephone: (269) 429-7703  
Fax: (269) 429-2079

**Application/Reapplication for St. Joseph Charter Township Appointment**

Name: \_\_\_\_\_ Occupation/  
(Please print) Profession: \_\_\_\_\_

Home Address: \_\_\_\_\_  
Street Address City State Zip

Telephone: (Home) \_\_\_\_\_ (Work) \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

1. Applying/Reapplying For: \_\_\_\_\_

2. Are you a St. Joseph Charter Township resident? YES NO

3. Are you a registered voter in St. Joseph Charter Township? YES NO

4. Are you presently delinquent on your property taxes? YES NO

5. Have you ever been convicted of a felony? YES NO

6. Why would you like to be appointed or re-appointed?

\_\_\_\_\_  
\_\_\_\_\_

7. What skills would you bring to this position? (i.e., education, certification, life skills)

\_\_\_\_\_  
\_\_\_\_\_

8. List membership or participation on other governmental committees, boards, or community organizations, etc.

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_

Signature

\_\_\_\_\_

Date

Please complete this form in its entirety and return to St. Joseph Charter Township Manager, 3000 Washington Ave., St. Joseph, MI 49085, Fax: (269) 429-2079. If additional space is necessary, please attach additional sheets. Please Note: Applications remain valid for one year from date of submission. If you have questions, please call (269) 429-7703, ext. 1266.