## CHAMPAIGN COUNTY APPOINTMENT REQUEST FORM Fire, Cemetery, Water, & Farmland Assessment

## PLEASE TYPE OR PRINT IN BLACK INK

NAME:		
ADDRESS: Street	City	State Zip Code
EMAIL:	PHONE:	
	dress Redacted on Public Documents	
NAME OF APPOINTMENT BODY O	OR BOARD:	
BEGINNING DATE OF TERM:	ENDING DA	TE:
The Champaign County Board apprecial background and philosophies will assist following questions by typing or leg APPOINTMENT, OR REAPPOINTMENT	st the County Board in establishing you gibly printing your response. IN O	our qualifications. Please complete the ORDER TO BE CONSIDERED FOR
1. What experience and background do y	ou have which you believe qualifies you	for this appointment?
2. What is your knowledge of the appoint	ted body's operations, property holdings,	, staff, taxes, and fees?
3. Can you think of any relationship or o to serve on the appointed body for which intended to provide information.)		
	Signature	
	Date	