

**CHAMPAIGN COUNTY APPOINTMENT REQUEST FORM**  
**Cemetery Association/Board**

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_  
Street City State Zip Code

**EMAIL:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

Check Box to Have Email Address Redacted on Public Documents

**CEMETERY ASSOCIATION/BOARD:** \_\_\_\_\_

**BEGINNING DATE OF TERM:** \_\_\_\_\_ **ENDING DATE:** \_\_\_\_\_

The Champaign County Executive appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Executive in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. **IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE THIS APPLICATION AND AN INTERVIEW WITH THE COUNTY EXECUTIVE.**

1. Are you a resident of the State of Illinois?  Yes  No
2. Do you live within 15 miles of the cemetery or have a family interest?  Yes  No
3. What experience and background do you have which you believe qualifies you for this appointment?

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

4. What is your knowledge of the appointed body's operations, property holdings, staff, taxes, and fees?

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

5. Please list any boards, commissions, or public positions to which you have been appointed or elected and are currently serving.

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

6. Can you think of any relationship or other reason that might possibly constitute a conflict of interest if you are selected to serve on the body for which you are applying? (This question is not meant to disqualify you; it is only intended to provide information.)  Yes  No If yes, please explain:

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7. Would you be available to regularly attend the scheduled meeting of the appointed body?  Yes  No If no, please explain:

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The facts set forth in my application for appointment are true and complete. I understand this application is a document of public record that will be on file in the Office of the County Executive.

\_\_\_\_\_  
Signature

Date: \_\_\_\_\_