

Entity Recommendation for Appointment to Boards & Commissions



Name of Board/Committee/Commission

--

Recommended Appointee's Information

Name:		
Street Address:		
City:	State: IL	Zip:
Home Phone:	Cell Phone:	
E-Mail Address:		
Has Individual served on this Board/Committee/Commission before, Start Year?		End Year?
Employer/Occupation (previous if retired):		

Why Are You Recommending This Individual?

--

Entity Agreement

I affirm that the above Recommended Appointee has consented to be nominated, has the time to serve, and that this Entity approved this recommendation at a Board Meeting on: _____.

Entity Contact Person:	Title:
Contact Phone:	Contact E-Mail:
Signature:	Date:

Submit Application by: Email: administration@dekalbcounty.org
 Fax: (815) 895-7284
 Mail: Administration Office, 200 N. Main St., Sycamore, IL 60178