



CITY OF HALSTEAD

Volunteer Board & Commission Application

Thank you for your interest in serving the City of Halstead.

Please complete this application in full.

Applicant Information

Date	
First Name	
Middle Name	
Last Name	
Address	
Phone Number	
Email Address	

Residency Information

Are you a resident of Halstead? ☒ Yes ☐ No

If yes, how long have you resided within the City of Halstead? _____

Employment Information

Employer: _____ Occupation/Job Title: _____

Volunteer Interest

Is there a specific board, commission, or committee you are interested in serving on?

What motivates you to seek appointment to this position?

What experiences, skills, or qualifications would you bring to this appointment?

What community or civic organizations are you currently active in?

What boards, commissions, organizations, or volunteer positions have you served on in the past?

Meeting Attendance & Participation Expectations of Volunteer Board Members

- Members are expected to attend regularly scheduled meetings.
- Consistent attendance is important to ensure quorum requirements and effective operation of the board/commission.
- Members should notify staff in advance when unable to attend a meeting whenever possible.
- Members should demonstrate the ability to remain objective and unbiased while making difficult and sometimes unpopular decisions under public scrutiny

City Council Introduction & Participation

Would you be willing to attend a City Council meeting to introduce yourself and speak briefly about your interest in serving on a board or commission? ☐ Yes ☐ No

References

Reference #1

Name: _____

Relationship: _____

Phone Number: _____

Email Address: _____

Reference #2

Name: _____

Relationship: _____

Phone Number: _____

Email Address: _____

Adherence Acknowledgments

Please sign below acknowledging that, if appointed, you agree to comply with the requirements of the Kansas Open Meetings Act (KOMA), Kansas Open Records Act (KORA), and applicable provisions of the City of Halstead Code.

Applicant Signature: _____ Date: _____

Applicant Certification

I certify that the information provided in this application is true and complete to the best of my knowledge.

Applicant Signature: _____ Date: _____