

**BOARD APPLICATION FORM
HOT SPRINGS COUNTY, WYOMING**

NAME: _____ **HOME PHONE:** _____

ADDRESS: _____ **WORK PHONE:** _____

CITY: _____ **STATE:** _____ **ZIP:** _____

Please describe your experience or background that you believe qualifies you for service on this Board or Commission (attach additional sheets if needed):

Why do you wish to serve on this Board or Commission?

Additional information that you feel is pertinent (attach additional sheets if needed):

Signature

Date

Return application to: Board of County Commissioners
415 Arapahoe
Thermopolis, WY 82443

OFFICE USE ONLY:

APPOINTED: YES _____ NO _____ **DATE:** _____

TERM EXPIRATION DATE: _____

(Circle One)

ORIGINAL APPOINTMENT **REAPPOINTMENT** **TERM NO:** _____