

## COUNTY BOARD OF EQUALIZATION APPLICATION

### APPLICANT INFORMATION

Last Name	First	M.I.	Date
Street Address	Apartment/Unit #		
City	State	ZIP	
Phone	E-mail Address		

### EDUCATION

<b>High School</b>		Address			
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
<b>College</b>		Address			
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
<b>Other</b>		Address			
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree

### OTHER QUALIFICATIONS

List property owned by applicant

Address / Legal Description	
Address / Legal Description	

Elected posts held with terms of office

Have you ever been convicted of a felony? YES  NO

### PREVIOUS EMPLOYMENT / EXPERIENCE

<b>Company</b>	Phone
Address	Years
<b>Company</b>	Phone
Address	Years
<b>Other Relevant Experience</b>	

### DISCLAIMER AND SIGNATURE

After reviewing the qualifications and training requirements, please sign below indicating that you meet the qualifications and that you agree to comply with the training requirements:

Signature \_\_\_\_\_ Date \_\_\_\_\_

Print \_\_\_\_\_

**Civic Involvement:** Indicate civic clubs, organizations, etc. in which you are involved and office held, if any:

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**Elected posts held:** Indicate any elected office(s), governmental or otherwise, you have held or currently hold.

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**Qualifications:** Indicate additional credentials that you possess that qualify you for a appointment as a Board of Equalization member.

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