BOROUGH OF AMBRIDGE 600 Eleventh St. Ambridge, Pa 15003



STATEMENT OF QUALIFICATIONS APPOINTMENTS, BOARDS & COMMISSIONS

NAME:	
ADDRESS:	
HOME PHONE:	
WORK PHONE:	
CELL PHONE:	
EMAIL ADDRESS:	
POSITION I	
AM INTERESTED IN:	
AM INTERESTED IN.	Please - one board or commission per application -if more than one your application will be voided
REASON FOR MY	
INTEREST:	
QUALIFICATIONS:	

BY SIGNING THIS APPLICATION I CERTIFY THAT ALL INFORMATION GIVEN IS TRUE AND CORRECT AND THAT I GIVE PERMISSION FOR TO HAVE BACKGROUND CHECK. I UNDERSTAND THAT ANY FALSE INFORMATION GIVEN WILL DISQUALIFY ME. PLEASE NOTE THAT YOUR APPLICATION WILL BE KEPT ON FILE AT THE BOROUGH FOR 1 YEAR FROM DATE RECEIVED.