EAST CENTRAL REGIONAL DEVELOPMENT COMMISSION
Application for Public Interest Representative

Name __________________________________________________________
Address _______________________________________________________
County (Must be a resident of Region 7E) ____________________________
Phone _________________________ Cell Phone _______________________
Email __________________________________________________________
Occupation _____________________________________________________

Affiliations with Community Associations or Organizations:
1. Present _______________________________________________________
2. Past _________________________________________________________

Elective Offices Held: ___________________________________________

Other Interests: _________________________________________________

I hereby submit my name for nomination to become a member of the East Central Regional Development Commission. I understand that the position is for a two-year term to represent the general public interest.

Signed: _______________________________________________________

Date: ___________________________________________________________