



City of Belgrade

91 E. Central Ave.  
Belgrade, MT 59714  
Phone: 406-388-3760  
Fax: 406-388-4996

APPLICATION FOR  
APPOINTMENT TO CITY OF BELGRADE COMMITTEE

Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_  
Work Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

POSITION APPLYING FOR:

- Board of Adjustment 3 Year Term
- City Tree Board 2 Year Term
- City/County Planning Board 2 Year Term
- Independent Grievance Review Board 2 Year Term
- Library Board of Trustees 5 Year Term
- Park and Recreation Board 2 Year Term
- Police Commission 3 Year Term
- Revolving Loan Fund Review Committee 2 Year Term
- Impact Fee Advisory Committee 2 Year Term
- Solid Waste Management District 3 Year Term
- Gallatin Local Water Quality Board 3 Year Term
- Streamline Advisory Board 2 Year Term

Please summarize and describe your interest and qualifications for the position(s) you wish to be considered for.

Completed applications should be submitted to the  
City of Belgrade, 91 E. Central, Belgrade, MT 59714 Attention: Director of Finance.

References:

Name and Phone Number: \_\_\_\_\_  
Name and Phone Number: \_\_\_\_\_  
Name and Phone Number: \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant