

# Citizen Appointment Application

Our mission is to deliver quality public services to the citizens in an effective, professional and efficient manner.



Position Sought: \_\_\_\_\_  
(Appointment you are seeking)

Applicant Name: \_\_\_\_\_  
(First Name) (Last Name)

Your Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Fax: \_\_\_\_\_

Township: \_\_\_\_\_ Commissioner District: \_\_\_\_\_

Did the Appointing Authority suggest you submit your application? Yes \_\_\_\_\_ No \_\_\_\_\_

Any other information the nominating person feels would be helpful to the Appointing Authority:

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I swear that, to the best of my knowledge, the above information is correct and that I satisfy all legally prescribed qualifications for the position sought.

\_\_\_\_\_  
(Signature of Applicant)\*

\_\_\_\_\_  
(Date)

\*If another or group is nominating the applicant, the applicant's signature indicated consent to nomination.

Mail, Fax, or submit  
Application in  
Person, to:

Cass County Administrator  
Cass County Courthouse  
PO Box 3000  
Walker MN 56484-3000

Fax: (218) 547-7455  
Phone: (218) 547-7419  
Email: [jessica.lego@co.cass.mn.us](mailto:jessica.lego@co.cass.mn.us)

Applicants will not receive an acknowledgement of submitted applications; the appointing authority will notify you if an interview is desired.