

Open Appointments Application for Advisory Committees/Commissions/Boards

Part 1: Applicant Information

Αp	plicant Name:	Last Name		First Name		M.I.	☐ Mr.	☐ Mrs.	☐ Ms.
Ho	me Address:	Street Address							
		City		MN State	Zip		County of	Residen	ce
Co	mmissioner District:	(Leave blank if you do n	ot kr	now the number	of your commi	ssioner	district.)		
Tel	ephone:	Cell	Bu	siness		Но	ome		
E-n	nail Address:								
Par	rt 2: Committee Select	tion							
acc	cording to preference	of the committee(s) for which you a (1 being your first choice). All applicommittee(s) you select below.							te only
	Dakota-Scott Workfor	ce Development Board		Public Art Advis	sory Committe	e			
	Disability Advisory Co	puncil		Special Board	of Appeal and	Equaliza	ation		
	Extension Committee			Vermillion Rive	r Watershed P	lanning	Commissio	n	
	Library Advisory Com	mittee		Zoning Board of	of Adjustment				
	Planning Commission	1		Other:					
Par	rt 3: Your Rights as a	Subject of Data/Applicant Declaratio	n]					
this stat info volu mo Sta app hav tha	s application is private of tus as recipient of huma ormation will be available untary. Failure to provi- re advisory committees ate law requires your responded to an advisory of the an email address, Da t your business telepho	atutes Chapter 13, Dakota County informatata: telephone numbers, fax number, an services, and criminal record. Unless le only to you and county officials who is de the information requested in Parts 4 s. The remainder of the information in the sidential street address and either your committee. Unless you indicate otherwise akota County will make your home telephone number instead of your home telephone akota County make public (check all	resides are en a ema ema ema ema ema ema ema ema ema e	lential street add ad until you are a lit to perform the of this applicatio application is pub- ail address or tel- Dakota County v e number public anumber be mad	dress, email ad appointed to ar eir job duties. n may disquali olic. ephone numbe vill make your c. You may rec	Idress, b n advisor Furnishi fy you fr er be ma email ad	usiness/fin ry committe ng this info om appoin de public it dress publ	ancial interes, this rmation is tment to of you are ic. If you	erest, s one or do not
	☐ Cell phone nu☐ Business phon☐ Home phone n☐ E-mail addres	ne number: number:							
Sig	nature of Applicant			Date					

Part	4:	Per	Diem
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additional Personn	ounty Board advisory committee a al expense reimbursement) for att el Board of Appeals (\$50 per dier er day or \$87.50 per half-day plus on.	endance at regular n plus expense reir	and special meeting and sp	ngs of the committendance), and Spe	ee. Exceptions a ecial Board of Ap	are appointees to the peal and Equalization
Please o	check this box if you wish to declin	ne the per diem:	☐ Decline			
Part 5:	Affiliation with Dakota County					
Dakota (County employees are not eligible	for appointment to	any advisory com	mittee, unless othe	erwise provided b	by law.
Are you	an employee of Dakota County?					
□ Yes	□ No					
appointn	als affiliated with Dakota County a nent process and are not automa 1) has a contract with Dakota Cou	ically disqualified, i	unless otherwise pr	ovided by law. For		
Are you	currently under contract with or e	mployed by a contr	actor of Dakota Co	unty?		
□ Yes	□ No					
If yes, w	hich contractor?					
Part 6:	Statement of Qualifications (Ye PLEASE NOTE: In accordance a member of any citizen advise	with County poli	cy, no paid emplo	yee of Dakota Co		•
Busines	ss/Employer:					
Busines	ss Address: Street		City	State	e Zip	County
Job Title	e:					
Current	Responsibilities:					
Previou	s Work Experience:					
Vocatio	nal/Educational Background:					

Community Service:	
Describe your interest in serving on an advisory committee:	
PLEASE NOTE: Some committees require Review Parts 8–10, and complete only those that	
Part 7: Dakota-Scott Workforce Development Board Applicants	Only
Minn. Stat. § 268.666, subd. 3, requires that local workforce councils of business concerns, chief executives or chief operating officers of rhave substantial management or policy responsibility), organized lab agencies that are representative of all educational agencies within thassistance agencies, economic development agencies, and public er	nongovernmental employers, or other private sector executives who or, workforce and community-based organizations, educational e workforce service area, vocational rehabilitation agencies, public
Private sector applications must be accompanied by a letter of suppocommerce). Public sector applications must be accompanied by a lethe Workforce Development Board, please call Dakota County Workf	etter of support from the parent agency. For further information on
Nominating Agency:	
Which do you represent: (Check all that apply)	
 □ Private Sector/Small Business □ Private Sector/Large Business (>500 employees) □ Private Sector/Minority Business □ Public/Apprentice 	 □ Public/Economic Development □ Public/Education □ Public/Labor □ Public/Public Assistance □ Public/Public Employment
□ Public/Community Based	
☐ Public/Community Based	☐ Public/Rehabilitation
	· ·
Part 8: Disability Advisory Council The Disability Advisory Council will offer the opportunity to make a did Dakota County. The Council will actively work to develop a communication working, and thriving in Dakota County.	☐ Public/Rehabilitation fference in how disability access and services are provided in
Part 8: Disability Advisory Council The Disability Advisory Council will offer the opportunity to make a di Dakota County. The Council will actively work to develop a community	☐ Public/Rehabilitation fference in how disability access and services are provided in ty that welcomes people with disabilities into all aspects of living,

Part 9: Planning Commission Applicants Only
Minnesota Statutes Section 394.30, subdivision 1, the statutory authority under which the Dakota County Planning Commission has been created, requires that: "No voting member of the commission shall have received, during the two years prior to appointment, any substantial portion of income from business operations involving the development of land within the county for urban or urban related purposes."
During the last two years, have you received any substantial portion of your income from business operations involving the development of land within Dakota County for urban or urban related purposes?
□ Yes □ No
Part 10: Vermillion River Watershed Planning Commission Applicants Only
The Vermillion River Watershed Joint Powers Board, consisting of commissioners from Dakota and Scott Counties, makes appointments to the Watershed Planning Commission. Qualified applicants must reside in the watershed (residency will be verified upon receipt of this application) and may be elected officials. Employees of local governments located in the watershed are not eligible for appointment.
1. Are you an elected official?
☐ Yes ☐ No If yes, for what government entity?
2. Do you have personal or employment experience in a field related to watershed management?
☐ Yes ☐ No If yes, please specify relevant experience:
THANK YOU!
Return completed form to:
Sr. Administrative Coordinator to the Board Administration Center 1590 Highway 55 Hastings, MN 55033
Email: board@co.dakota.mn.us
Office Use Only
Date Received: Appointment Date:
Date Entered: Term Ended Date:
Appointed: Yes No Retention Date:
Committee