



ELLIS COUNTY CITIZEN INTEREST FORM

(Note: Separate form required for each volunteer opportunity in which you are interested)

Name: _____

Physical Address: _____

Mailing Address: (if different) _____

Day Time Phone Number: _____ Evening Phone Number: _____

Email Address: _____

How long have you been a resident of Ellis County? _____

Volunteer opportunity in which you are interested (Please Check Box):

| | |
|--|--|
| <input type="checkbox"/> Care Council (United Way Allocations) | <input type="checkbox"/> High Plains Mental Health Board |
| <input type="checkbox"/> Central Kansas Library System Board | <input type="checkbox"/> Joint Planning Commission (county zone) |
| <input type="checkbox"/> Ellis County Council on Aging Board | <input type="checkbox"/> Local Emergency Planning Committee (LEPC) |
| <input type="checkbox"/> Ellis County Historical Society Board | <input type="checkbox"/> Northwest Kansas Community Corrections |
| <input type="checkbox"/> Hays Area Planning Commission (3-mile zone) | <input type="checkbox"/> Volunteer Firefighter |

For other volunteer opportunities, please contact the County Clerk's Office at 785-628-9410.

How much time are you willing to devote to the volunteer opportunity selected? _____

Are you related to anyone who is currently serving in an Ellis County Volunteer Position? Yes No

If Yes, explain: _____

Briefly describe why you are interested in the volunteer opportunity selected:

Please list any groups, committees, non-profits, or other activities you are or have participated in as a demonstration of community involvement:

Committee/Board Member Pledge: As a volunteer for Ellis County, I understand I am representing Ellis County, not myself. If I am appointed to a board/committee responsible for hearing public input, I pledge to consider all public input received in an unbiased manner and make my final decision or recommendation based on the facts learned during the process that is in the best interests of Ellis County, not whether I personally agree with the decision.

Signature: _____ Date: _____

By signing this form, you are agreeing to the pledge and testifying all information provided is accurate to the best of your knowledge.