## SALUDA COUNTY BOARDS AND COMMISSIONS APPLICATION

Name:		
Last	First	Middle
Current Address: Street		
City	State	Zip
Name of Board or Commission I	being considered for:	
Telephone: Home ( )	Office ( )	
Email Address:	Voter Registration No	
	ate or Equivalent GED Pro	
Present Employer:		
Address:	City	State Zip
Have you ever been convicted of	f a crime other than a minor traffi	c violation?
If yes, give details.		
Have you filed state and federal	income tax returns for the past five	ve years?
If no, give details.		
Have you ever had a lien or judg	gment filed against you?	
If yes, give details:		
	any mental illness, alcohol, drug a _ If yes, give details	
Have you served in military serv	vice? Honorable Dis	schargeYesNo
	te board, commission, committee	<del>-</del>
	serving on the board/commissiones, list relative's name	
	employed by Saluda County? _	

I hereby agree to attend the stated and called meetings of this entity to which I may be appointed and further agree that should I miss (a) three consecutive meetings, or (b) one-half of the meetings within a six-month period, I will resign my appointment. Absence for reasons beyond the control of the member (illness, death in the family, etc) may be excused by the chair with reasonable notification prior to the meeting.

I hereby authorize Saluda County and/or its agents to conduct criminal background checks and further understand that same investigation can be considered for or against appointment on a board/commission for Saluda County.

	Applicant's Signature
Sworn to before me this, 20	Date
Notary Public for South Carolina My Commission Expires:	