

**BIOGRAPHICAL OUTLINE  
BOARD APPOINTMENTS  
STARK COUNTY COMMISSIONERS' OFFICE**

Please fill this outline out completely and return to:

*Stark County Board of Commissioners  
110 Central Plaza South Suite 240  
Canton, Ohio 44702*

Regarding: **Appointment/Reappointment to:** \_\_\_\_\_  
(Please fill in title of Board)

**1)**  
Full Name \_\_\_\_\_

Occupation \_\_\_\_\_ How Long? \_\_\_\_\_

**2)**  
Business Name and Address \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Telephone Number (\_\_\_\_) \_\_\_\_\_

**3)**  
Home Address \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Telephone number (\_\_\_\_) \_\_\_\_\_

**4)**  
How long have you lived in Stark County? \_\_\_\_\_

Educational History \_\_\_\_\_  
\_\_\_\_\_

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**5)**  
Professional and Community Organization Affiliations (past and present)

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**6)**  
Do you or any member of your family hold a position on a Board of Directors', serve as an officer or an employee, own stock or have a financial interest in any company or agency that does business with the entity which is subject of this appointment and/or will the decisions that will be made by the group to which you are seeking to be appointed directly or indirectly financially benefit you or any member of your family? If so, please explain

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**7)**  
Please share any other information the Board should consider regarding this appointment

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**8)** \_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date of Signature