

APPLICATION

KING COUNTY FIRE PROTECTION DISTRICT 45 COMMISSIONER



NAME: _____

DATE: _____

ADDRESS: _____

PRIMARY PHONE: _____

CITY/ZIP: _____

EMAIL ADDRESS: _____

ARE YOU A DISTRICT RESIDENT? YES NO HOW LONG? _____ REGISTERED VOTER? YES NO
(NOTE: A District resident resides within the boundaries of the Fire Protection District)

NAME/ADDRESS OF EMPLOYER:

OCCUPATION:

EDUCATIONAL BACKGROUND (including, but graduated and Dog. 300): _____

PROFESSIONAL EXPERIENCE:

ORGANIZATIONAL AFFILIATIONS:

WHY ARE YOU SEEKING APPOINTMENT?

GENERAL REMARKS:

Please return completed application to:

King County Fire Protection District 45
ATTN: Board Secretary
175 Newport Way NW
Issaquah, WA 98027
Phone: (425) 313-3232
Email: mknutson@esf-r.org

Applicant Signature