

VILLAGE OF OSWEGO

EXTRAORDINARY OSWEGOAN COMMITTEE

Name: _____ Date: _____

Address: _____ email: _____

Phone No. (day) _____ (evening) _____

Occupation: _____

1. How long have you lived in the Village of Oswego? _____

2. Please mark each component you would be interested in helping with:

_____ Budget

_____ Special Events

_____ Media/Publicity

_____ Other

Meetings are held during evening hours and meeting times are to be determined.

Place a check beside the best days of the week that you could serve on a committee:

_____ Monday

_____ Tuesday

_____ Wednesday

_____ Thursday

_____ Friday

3. What skills and qualifications do you believe would assist you with serving on this Village Commission?

(OVER)

4. Please identify the strengths and weaknesses on this topic which currently exist in the Village of Oswego.

5. What is your vision of Oswego over the next decade?

6. Please list any other characteristics that would highlight your qualifications for service on a committee.

***Please submit your application to: Village President
Brian LeClercq
Village of Oswego
100 Parkers Mill
Oswego, IL 60543***

OR Fax to: 630-554-3306

Please attach any additional information and/or resume to this document.