



MARION COUNTY  
BOARDS & COMMISSIONS  
APPLICATION FOR SERVICE

Name \_\_\_\_\_ County Council District \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Tel. Number (home) \_\_\_\_\_ (work) \_\_\_\_\_ (Cell) \_\_\_\_\_

Email Address \_\_\_\_\_

Are You Currently Serving on a County Board or Commission? \_\_\_\_\_ Yes \_\_\_\_\_ No

Length of Residence in Marion County: \_\_\_\_\_

Board or Commission you wish to serve.

\_\_\_\_\_ Marion County Emergency Management Advisory Board

\_\_\_\_\_ Marion County Board of Tax Review and Appeals

\_\_\_\_\_ Marion County Museum Commission

\_\_\_\_\_ Trinity Behavioral Care

\_\_\_\_\_ Marion County Accommodations Tax Oversight Committee

\_\_\_\_\_ Marion County Board of Adjustments and Appeals

\_\_\_\_\_ Marion County Economic Development Commission

\_\_\_\_\_ Marion County Planning Commission

\_\_\_\_\_ Marion County Historical Commission

\_\_\_\_\_ Marion County Library Board

\_\_\_\_\_ Marion County Beautification Commission

\_\_\_\_\_ Marion County Board of Zoning and Appeals

Why Do You Wish To Be A Member of the Particular Board(s) or Commission(s) Chosen:

---

---

---

Are You Available to Attend Night Meetings: \_\_\_\_\_ Yes \_\_\_\_\_ No

Are You Available to Attend Day Meetings: \_\_\_\_\_ Yes \_\_\_\_\_ No

Current Occupation and Employer: \_\_\_\_\_

---

I understand this appointment will require substantial effort on my part and I am willing to devote the necessary time to carry out the responsibilities and requirements of the position.

Applicant's signature \_\_\_\_\_ Date \_\_\_\_\_

Applicants will be notified of appointments by mail. Frequent non-attendance by members may result in termination of the appointment. If you have questions or need more information, contact the County Administration office at 843-431-5059.

Please submit your application to:

Ms. Sabrina Davis  
Marion County Clerk to Council  
PO Box 183  
Marion, SC 29571