

**BIG HORN COUNTY, WYOMING
APPLICATION FOR APPOINTMENT TO BOARD OR COMMISSION**

Big Horn County Appointed Boards		
BHC Solid Waste Board	BHC Health Officer	BHC Weed & Pest Board
Byron Solid Waste Board	BHC Planning & Zoning Board	BHC Fair Board
BHC Library Board		Predatory Management Board
Preferred Board(s) to serve on:		Date:
Name:		
Mailing Address:		
Home Phone or Cell Phone: Work Phone:	E-mail Address:	
Occupation or Special Interests:		
Have you served on this board before?	If yes, how many years?	
Reasons for wanting to serve on the board:		
<p>If applying to a Board or Committee, do you qualify based on the following qualifications: involvement with and expertise in the various multiple uses of federal and state managed lands, as well as the customs, culture, economic viability, and social stability of Big Horn County. Yes, I qualify:_____ No, I do not qualify:_____</p> <p>If selected for a Board position, do you agree to read and perform your duties as outlined in the Board Manual available to you online? Yes:___ No:___</p> <p>Are you under the employment of any federal or state agency? Yes:_____ No:_____</p> <p>If so, which one:</p>		
List qualifications to serve on the board:		
Other comments:		
References (optional):		
Supplemental information such as a resume or reference letters may be attached.		

Continued on next page.

Background Check Authorization Form Consent for Criminal Background History Check

Each employee or volunteer to be screened must sign an authorization/waiver/indemnity form, giving approval for the Big Horn County Commissioners to perform a criminal background check.

I hereby give my permission to the Big Horn County Commissioners to obtain information relating to my criminal history record. I understand that this information will be used, in part, to determine my eligibility for an employment/volunteer position with this organization. I also understand that as long as I remain an employee or volunteer here, the criminal history records check may be repeated at any time. I understand that I will have an opportunity to review the criminal history as received by the Big Horn County Commissioners and a procedure is available for clarification if I dispute the record as received.

Applicant's Signature _____
Date

Applicant's Printed Name _____
List maiden name or any other name used

Gender: Male ____ Female ____ Date of Birth (mm/dd/year) _____

Social Security Number _____

Address History

Current: _____
Street City St # Yrs at this address

Previous: _____
Street City St # Yrs at this address

Previous: _____
Street City St # Yrs at this address

Previous: _____
Street City St # Yrs at this address

Signature _____
Date

Return completed application to: **Big Horn County Clerk**
P.O. Box 31
Basin, WY 82410

Phone: 307-568-2357
Fax: 307-568-9375